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UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION

RECEIVED

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MICHAEL W. DOBBINS  
CLERK, U.S. DISTRICT COURT

ROBERT CLARK

P. O BOX 089002-DIV-10-2D

CHICAGO, ILLINOIS 60608

(Enter above the full name  
of the plaintiff or plaintiffs in  
this action)

vs.

Case No: \_\_\_\_\_  
(To be supplied by the Clerk of this Court)

Sheriff Miceal Shiehan

Sheriff Tomas Dart

Executive Director  
Godinez A. Salvador

Executive Director  
Kelly Baird

Superintendent Plaxico

Chief Moreci #76

(Enter above the full name of ALL  
defendants in this action. Do not  
use "et al.")

CHECK ONE ONLY:

  /   COMPLAINT UNDER THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983  
U.S. Code (state, county, or municipal defendants)

       COMPLAINT UNDER THE CONSTITUTION ("BIVENS" ACTION), TITLE  
28 SECTION 1331 U.S. Code (federal defendants)

       OTHER (cite statute, if known)

**BEFORE FILLING OUT THIS COMPLAINT, PLEASE REFER TO "INSTRUCTIONS FOR  
FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.**

**I. Plaintiff(s):**

- A. Name: Robert Clark
- B. List all aliases: None
- C. Prisoner identification number: 20040096333
- D. Place of present confinement: Cook County Jail
- E. Address: P.O.BOX 089002 div-10-2D Chicago Illinois 60608

(If there is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. number, and current address according to the above format on a separate sheet of paper.)

**II. Defendant(s):**

(In A below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in B and C.)

- A. Defendant: Sheriff Micheal Shiahn
- Title: Sheriff
- Place of Employment: Cook County Department of Corrections
- B. Defendant: Sheriff Tomas Dart
- Title: Sheriff
- Place of Employment: Cook County Department of Corrections
- C. Defendant: Executive Director Godínez A. Salvador
- Title: Executive Director
- Place of Employment: Cook County Department of Corrections

(If you have more than three defendants, then all additional defendants must be listed according to the above format on a separate sheet of paper.)

- D. Defendant: Manos**  
**Title: Sergeant of Division -10**  
**Place of employment: Cook County Department of Corrections**
- E. Defendant: Pedro Castillo**  
**Title: Correctional Officer of Division-10**  
**Place of employment: Cook County Department of Corrections**
- F. Defendant: Wiley**  
**Title: Nurse of Division-10**  
**Place of employment: Cook County Department of Corrections**
- G. Defendant: Scalfe # 10**  
**Title: Captain of Division**  
**Place of employment: Cook County Department of Corrections**
- H. Defendant: D. Martinez**  
**Title: Lieutenant of Division -10**  
**Place of employment: Cook County Department of Corrections**
- I. Defendant: Collins**  
**Title: Sergeant of Division- 10**  
**Place of employment: Cook County Department of Corrections**
- J. Defendant: Carter**  
**Title: Correctional Officer of Division-10**  
**Place of employment: Cook County Department of Corrections**
- K. Defendant: Kelly**  
**Title: Correctional Officer of Division-10**  
**Place of employment: Cook County Department of Corrections**
- L. Defendant: Name allegeable on ticket**  
**Title: Hearing board members of Division -10**  
**Place of employment: Cook County Department of Corrections**

- M. Defendant: Mareci #76**  
**Title: Chief of "division -10**  
**Place of employment: Cook County Department of Corrections**
- N. Defendant: Full name unknown**  
**Title: Administrator if Cernacj**  
**Place of employment: Cook County Department of Corrections**
- O. Defendant: Dr, Mansour**  
**Title: Medical Doctor**  
**Place of employment: Cook County Department of Corrections**
- P. Defendant: Dr Dunlap**  
**Title: Medical Doctor**  
**Place of employment: Cook County Department of Corrections**
- Q. Defendant: Ms Tate qnd Maxi**  
**Title: Nurses**  
**Place of employment: Cook County Department of Corrections**
- R. Defendant: George Barrero**  
**Title: Head of mail room**  
**Place of employment: Cook County Department of Corrections**
- S. Defendant: Holly Demski and Muka Chatman**  
**Title: Aramark employees**  
**Place of employment: Cook County Department of Corrections**
- T. Defendant: Full name unknown**  
**Title: Present and C.E.O. of Aramark**  
**Place of employment: Cook County Department of Corrections**
- U. Defendant: Plaxico**  
**Title: Correctional Officer of Division-10**  
**Place of employment: Cook County Department of Corrections**

- V. Defendant: Arce**  
**Title: Captain of Division- 10**  
**Place of employment: Cook County Department of Corrections**
- W. Defendant: Castro**  
**Title: Sergeant of Division- 10**  
**Place of employment: Cook County Department of Corrections**
- X. Defendant: Salazar**  
**Title: Superintendent of Division -10**  
**Place of employment: Cook County Department of Corrections**
- Y. Defendant: Ms Gracy and Ms Bulter**  
**Title: Counselors of Division-10**  
**Place of employment: Cook County Department of Corrections**
- Z. Defendant: Kelly Baird**  
**Title: Executive Director**  
**Place of employment: Cook County Department of Corrections**

### III. Exhaustion of Administrative Remedies

You are required to exhaust all your available administrative remedies before bringing an action in federal court.

A. Is there a grievance procedure available at your institution?

YES ( / ) NO ( ) If there is no grievance procedure, skip to F.

B. Have you filed a grievance concerning the facts in this complaint?

YES ( / ) NO ( )

C. If your answer is YES:

1. What steps did you take?

AFTER VERBALLY COMPLAINING TO PROPER OFFICIALS FOLLOWING THIER  
CHANGE OF COMMAND, I THEN FILED GRIEVANCES ON ALL LEVELS OF  
ADMINISTRATION.

2. What was the result?

THE BLAM OF GRIEVANCE MISHANDLING WAS PAST, AND THE ISSUE WAS  
CONSIDERED MOOT.

3. If the grievance was not resolved to your satisfaction, did you appeal?  
What was the result (if there was no procedure for appeal, so state.)

YES, ALL GRIEVANCE REMEDIES WAS EXHAUSTED. MOST GRIEVANES FILED  
WENT UNANSWER AND THE REST WAS REDIRECTED TO OTHER DEPARTMENTS  
WITH MIS-INTERPETEDED FACTS.

D. If your answer is NO, explain why not:

-----N/A-----

-----N/A-----

-----N/A-----

E. Is the grievance procedure now completed? YES ( / ) NO ( )

F. If there is no grievance procedure in the institution, did you complain to authorities? YES ( / ) NO ( ) -----N/A-----

G. If your answer is YES: -----N/A-----

1. What steps did you take?

-----N/A-----

-----N/A-----

-----N/A-----

2. What was the result?

-----N/A-----

-----N/A-----

-----N/A-----

H. If your answer is NO, explain why not:

-----N/A-----

-----N/A-----

-----N/A-----

-----N/A-----

-----N/A-----

-----N/A-----

**IV. List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal court (including the Central and Southern Districts of Illinois):**

- A. Name of case and docket number: -----N/A-----  
-----N/A-----
- B. Approximate date of filing lawsuit: -----N/A-----
- C. List all plaintiffs (if you had co-plaintiffs), including any aliases: -----  
-----N/A-----  
-----N/A-----  
-----N/A-----
- D. List all defendants: -----N/A-----  
-----N/A-----  
-----N/A-----  
-----N/A-----
- E. Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county): -----N/A-----
- F. Name of judge to whom case was assigned: -----N/A-----  
-----N/A-----
- G. Basic claim made: -----N/A-----  
-----N/A-----  
-----N/A-----
- H. Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?): -----N/A-----  
-----N/A-----  
-----N/A-----
- I. Approximate date of disposition: -----N/A-----

**IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.**



State here as briefly as possible the facts of your case. Describe precisely how each defendant is involved. Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

Plaintiff brings forth several complaints against officers and administrative personnel of the Cook County Department of Corrections.

When plaintiff filed grievances regarding each matter, defendants instead responded in complete disregard to the said grievances. This campaign of willful, malicious, torturous and deliberate lack of proper conditions and treatment included but not limited to:

- 1). Deliberate and intentional campaign of lack of proper living condition and treatment
- 2). Repeated disregard to the filing of grievances, concerning these matters.
- 3). Willful disregard to the response of some grievances by officers and staff.
- 4). Deliberate and torturous campaign of lack of proper medical care.

#### **COUNT 1; STAFF MISCONDUCT.**

On Dec. 23, 2005 plaintiff got into an argument with several guys on his tier 2D-division-10. Plaintiff was struck in the face several times by a detainee name Victor McGee. Plaintiff was knocked out for approximately ten seconds. When plaintiff came to Victor was in the enter-lock with officer Pedro Castillo. Plaintiff saw a detainee by the name of John Taylor at the enter-lock door trying to get officer Castillo to call a sergeant, it was at this time that plaintiff found out that John Taylor was slapped with an ink pen by another detainee. Plaintiff then went to the enter-lock also trying to get officer Castillo to call a sergeant but he refused to do so because Victor McGee was one of officer Castillos workers and he did not want to get him in trouble. Officer Castillo waited approximately an hour when he thought things had died down then he called church and it was at that time that plaintiff went out to church and told sergeant Manos and several other officers what had happen. Instead of them investigating the incident they tried to put plaintiff in protective custody instead of disciplining the detainees that attacked plaintiff and John. After plaintiff refused to go to protective custody sergeant Manos made plaintiff sign a refusal form. Plaintiff was then taken to see Wiley the nurse who said plaintiff only had swelling around his left eye and that plaintiff will be all right. Plaintiff was then sent back to his tier with no further investigation done the next day plaintiff had two black eyes and swelling to the left side of his face. Plaintiff filed grievance but nothing was done concerning this matter. therefore defends Sergeant Manos, Officer Pedro Castillo, and several other officers (Names Unknown) can be expected to know of or participated in creating this situation.

I was found guilty on disciplinary charges on 4/28/06 for something I did not do. I was lied on by officer (Carter#1169) for (110 Verbally or Physically Demonstrating Distress to a Staff Member, 202 Being in a Unauthorize Area, 208 Verbal Threat to Another Person On 4/25/06 Plaintiff Robert Clark was the last person in line to see the nurse Plaintiff was also called to the enter lock by the counsler Ms. Gracy. There was one guy in front of me so I went to use the washroom. When I got finish the gut that was in front of me was finish seeing nurse Jefferson and was leaving the enter lock when I got to the enter lock door I had just cought the door and Ms. Jefferson as she was leaving out the other door. When I entered the enter lock to ask Ms Jefferson about my medication thats when officer Carter #1169 jest upped and snapped on me, telling me to get out of " his enter lock" I told him that I wanted to see the nurse and how was he jest going to deny me of seeing the nurse. At that time Ms. Jefferson asked me want I needed, I explained to her about not receiving my medication and she said that she would take care of it. All the time this was going on the counsler Ms. Gracy was standing there and another nurse that Ms. Jefferson was training. When Ms Jefferson started backing out of the enter lock to leave I turned around and officer carter said that I was going to get a ticket I asked him for what, I have not done anything. Officer Carter then stated well you will read about it. That was all said between Plaintiff and officer Carter. Counsler Gracy then started talking to me about a grevance I wrote about my diet trays. She gave me my reply then I left the enter lock. Later that day I was moved to another tier the next day I talked to sergeant Collins and Chief Moreci #76 after talking with Chief Moreci #76 I was thrown in segregation for no reason at all and written another ticket for refusing recreation which was not true. I did not get a ticket from officer Carter until the next day after Chief Moreci told him to write me one. After seeing the disciplinary hearing board plaintiff was given 14 days in segregation because no one cared to investitate my ticket. Nusre Jefferson and another nusre was there and counsler Gracy was also there I asked the hearing board to notify them as witnesses but they refused to do so. I also appealed to Superintendent Plaxico he came to see me after my mother call him for me. He said that he was going to investigate my ticket and let me out of segregation but that never happened. Therefore defendants Chief Moreci#76, Capt. Scaife#10, sgt. Collins, Lt. D. Martinez#97, Superintendent Plaxico, Officer Carter#1169, Officer Kelly#3199, and everyone on the hearing board (NAMES UNLEDGEABLE) on ticket. can be expected to know of or participated in creating this situation.

### COUNT 3; DEFICIENT MEDICAL ATTENTION.

Plaintiff as been complaining to nurse Maxi and Ms. Tate about having severe pain in his lower back and both of his legs for over a year. Everytime plaintiff turns in a medical form to Maxi or Ms. Tate they refuses to turn them in to the doctor, because they are the ones who determines who should see the doctor and who should not. The nurses are not doctors how can they determine if plaintiff is hurting or not. Finally when Dr. Mansour

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did examine the affected areas with Document 1 he did not do anything only after repeated complaints and several visits to the health care was catscan ordered by Dr. Dunlap who plaintiff also has been complaining to. Plaintiff was then sent to cermack where catscan reports showed that plaintiff had a (MISS LOCATED HERIATED DISK) in his lower back that was pushed up agaিসnt a nerve which caused the pain in plaintiffs lower back and legs. At that point no futher medical attention was administered to plaintiff by said center. At that point, plaintiff started a compaign of grievance reports in prayer of getting proper medical attention. Plaintiff as also compained to nurse Maxi and Ms. Tate about a severe tooth ache for over four months and plaintiff was told by both nurses that there is no longer a detist here in division-10 and that there is only one denist for the hold Cook County Department of Corrections. When plaintiff did finally get called for dental on approxiately May 18, 07 the denist did not show up forcing plaintiff to endure continious excruciating debilitating pain and suffering for approximately another month and a half. Plaintiff was not called back to dental until approximately July 8, 07 and the denist still did not show up until the next day. It was only then that plaintiff finally got his tooth pulled after suffering severe pain for over four months and I have another tooth thats has been bothering me since that date that I cant get pulled. also on August 14, 06 in a memo to all detainees the Cook County Department of Corrections took certain detainees gym shoes on August 21, 06 stating that they did it to improve the safety and security for all detainees housed at Cook County Department of Corrections so why didnt they take shoes in all divisions they only took shoes in division 1,9,10,and 11 and they only took half of those detainees shoes, and the ones that they did give shoes to they are tore up already. These County issued only last a month or two and it is hard for you to get another pair. Cook County Officails also did not take in the consideration of certain detainees medical conditions. A detainee might have flat feet and can not wear county issued shoes. Some detainees need shoes with an arch in them, some detainees also have other medical problems that prevent them from wearing such shoes. These shoes as caused swealing of some detainees feet, blisters, and arches to drop. I have a hip problem and a metal rod and plate in both of my legs. Some detainees have medical preciptions and court orders for our shoes but the Cook County Jail officails will not honor them. Detainees recreation as also been cut short because of these shoes. We are not able to no longer play basketball, jog, or lift weights. I dont see how this improves the safety or security for all detainees housed at Cook County Jail, first, they did not take all detainees shoes, second, detainees are stripped searched when they first come through recieving then are taken to thier assigned divisions where they are stripped seached again and then your shoes are taken from you, but at this point and after three strip searches if any detainees as any contraband on them it as already intered the Cook County Department of Corrections. Shoes has to be taken in recieving for these reasons given by Cook County Department of Corrections. The Illinois Department of Corrections take inmates shoes in recieving but also reconize the problem with such shoes as temperary shoes and gives inmates the option of

buying some more shoes from thier commissary. The Cook County Department of Corrections can also provide gym shoes on thier commissary where they know there is no contraband in them if this is thier only reason, we are not convicted felones we are only detainees .Therefore, Doctor Mansour, Doctor Dunlap, Medical Administrator of Cermack, (Name Unknown), Ms. Tate, Maxine, and for the part concerning the shoes Sheriff Tomas Dart, Executive Director Salvador A. Godiney, Superentendent Andrews, Lt. Tucker can be expected to know of or participated in creating this situation.

#### Count 4, DEFICIENT COMMISSARY AND PRICE COUGING.

Evert since plaintiff has been housed here at (Cook County Department of Corrections), the commissary here has not been up to a normal or professional standard. Every week there is something either missing out of detainees order or detainees are given items that they did not order. Plaintiff is not supposed to sign the commissary pick ticket until he recieves and checks his order, but the Cook County Department of Corrections and Aramark Commissary personel makes plaintiff and other detainees sign the commissary pick ticket before they check thier order or plaintiff will not recieve his commissary. Once plaintiff has signed his pick ticket, commissary personel will not let plaintiff refuse order if something is missing or if it is not his order. Plaintiff is forced to take the order because he has signed the pick ticket. In either case if something is missing or if you are allowed to refuse an order it takes commissary presonel three to four weeks to put plaintiffs and other detainees money back in thier account. The commissary provided by the Cook County Department of Corrections through Aramark are also grossly over pricing commissary personal hygiene items and food items. They have raised prices dramatically after August 1, 2005 to make up for lost revenue from cigarette sales. They are also price gouging plaintiff is sold food items that are nonprofitable. Plaintiff and other detainees are cheated by the methods of The Cook County Department of Corrections and Aramark. Aramark is an unprofessional company plaintiff went through similar problems with his diet Plaintiff was told through detainees grievance response that this is a Cook County issue, not a commissary issue, Therefore this is a systemic situation so defendants; Executive Director, Salvador A. Godenez, Sheriff Michael F. Sheahan, Superintedant Plaxico, Holly Damske, Meeka Chatmen, and President and C. E. O. of Aramark (NAMES UNKNOWN) who hold contacts with the Cook County Department of Correction can be expected to know of or participated in creating this systemic situation.

#### COUNT 5; DEPRIVATION OF CULTURAL READING MATERIAL.

PLaintiff was receiving (BLACK AND LATINO) magazines while housed here at Cook County Department of Corrections. On approximately May 21, 2006 there was a memo placed on all wings with 46 black and latino magazines listed on it stating that the magazines that were listed will (NO) longer be allowed at Cook County Department of Corrections due to nudity. These magazines, such as (XXL, BLENDER, SOYRCE, VIBE, MAXIUM, STUFF, etc.) do not have nudity in them. The contents of these magazines has nothing in them that plaintiff or anyother detainee does not see on everyday television or DVD which

is provided by the Cook County Department of Corrections. Plaintiff understands that he is not allowed magazines with nudity in them like (PLAYBOY, BLACKTAILS, PENTHOUSE, etc.). The Cook County Department of Corrections has banded all black and latino ethnic magazine available that represent plaintiff and other minority group hip-hop culture. This is a systemic situation, Therefore defendants (Sheriff Michael Sheahan, Sheriff Tomas Dalt, Executive Director Kelly Baird, Executive Director Salvador A Godínez, Superintendent Plaxico and George Barrero head of mailroom, can be expected to know of or participated in creating this situation.

#### **COUNT 6; INADEQUATE BEDDING.**

Plaintiff has slept on the floor for approximately three months since he has been housed here at Cook County Department of Corrections. There are thousands of detainees that comes through the Cook County Department of Corrections each week that are forced to sleep on the floor in cells, do to overcrowdness. Detainees are put in cells on the floor so when inspectors or tourist come through it looks like (NO) one is sleeping on the floor. The cells here in Division-10 aren't big enough for two inmates so it's really hard to celly with three detainees in a cell you have to walk all over the third detainee that's on the floor. This is a systemic situation, Therefore defendants Sheriff Michael Sheahan, Sheriff Tomas Dalt, Executive Director Kelly Baird Executive Director Salvador A Godínez, and Superintendent Plaxico, can be expected to know of or participated in creating this systemic situation.

#### **Count 7; BASIC HUMAN NEEDS.**

On March 1, 2007 there was a new policy enforced here at Cook County Department of Corrections by Executive Director Godínez A. Salvador, SHERIFF Tomas Dart, and Superintendent Plaxico. On each tier, we are allowed out of our cells, half the tier at a time, If the lowside comes out in the morning, the highside comes out in the evening and the following morning also. Whoever has the evenings out also comes out the following morning. At the close of each day the morning lock-up is at 1:30 p.m. and whichever side had the morning shift out, must be confined to a cell for the next 26 to 27 hours, until 3:30 or 4:00 p.m. the following day after the day shift changes. If we have to lock-up while officers takes a lunch break we are only out of our cells a total of 3 1/2 to 4 hours every 27 hours at a minimum because officers do not come back on time from their lunch break. If plaintiff have mornings out, after plaintiff locks up at 1:30 he must go 27 hours without a shower, that's longer than plaintiff would go if he was on a disciplinary lock-down, which also seems to happen quite often here in division-10. If something happen on another tier, such as a fight instead of locking that tier down superintendent Plaxico and the director locks the hold building down but let certain tiers stay off lock down who he thinks should not

be on lock-down. On 7-26-07 there was a disturbance on 4D and the building went on lock-down a few days later acting superintendent Salazar let the second floor and 1B off of lock-down but left everyone else locked-up. If the second floor and 1B was let off lock-down because of thier non-involvement in the disturbance; then why not everyone that was not involved let out also, Plaintiff was also denied his visits except for immediate family. On 8-16-06 there was a memoplace on all tiers by superintendent Plaxico stating that detainees will no longer be allow to have clothes lines in thier cells. Plaintiff and other detainees are also not allowed to hang thier clothes in the dayroom. This does not make sence because where is plaintiff suppose to hang his wet under clothes, and county issued clothes when Cook County department of correction does not change them for weeks. The cook county jail does not provide any means of washing and drying plaintiffs or any other detainees under-clothes. We are also not allowed cleaning supplies nor are we allowed to clean our cells which has been a problem since Plaxico has been Superintendent here in division 10. Also doing the lock down from 6/26/07 to 7/11/07 acting Superintendent Salazar, Captain Arce, and Sergeant Casdro lead an expedition to take all cothes lines , cleaning supplies, cleaning rags and towels. This new policy is also effecting sevicees which ever side is locked up during the time of reliqiousservicees are denied the privilege to worship and particiate in those services we are not allowed to go to the law library on a regular basis any more it takes weeks or even months before we get to the law library because of the lock down they think you are putting in a pass jest to get out of our cells. The Cook Conty Department of Corrections has stop serving fruit all together we have not had any fruit for over a year and plaintiff only recieve three teaspoons of vegetables four to five times a week.

for all claims set forth and allegations made within this document, the claumed or alleged behavior of department employed at Cook County Departmnet of Corrections took place during the times indicated in claims.



For all claims set forth and allegations made within this document, the claimed or alleged behavior of department employee at Cook County Department of Corrections took place during the period up until this day in time...

Defendant manors was employed as the sergeant of division-10 at Cook County Department of Corrections during the time indicated and was the recipient of Complaint or grievance filed by the Plaintiff, and as such, knew that the incident alleged occurred because Plaintiff told him personally and Manos make plaintiff sign a protective custody refusal from, and is thus ultimately responsible for their occurrence. Count -1 of Complaint.

Defendant Pedro Castillo was employed as an correctional officer of Division-10 at Cook County Department of Corrections during the time indicated and was directly responsible for Plaintiffs safety, but failed to call for help when Plaintiff asked him to, and is thus responsible for certain of the claimed events in count-1 of Complaint.

Defendant Wiley was employed as an nurse in Division-10 at Cook County Department of Corrections and is directly responsible for the inadequate medical care receive by the plaintiff. Defendant is thus responsible for certain of the claimed went in Count-1 of Complaint.

Defendant Scaife #10 was employed as the captain of Division -10 Cook County Department of Corrections and was present at the alleged events. Defendant Scaife #10 also approved of alleged events by signing ticket instead of investigating, therefore, defendant Scaife #10 is responsible for certain of the claimed events that occurred during the time indicated in count-2 of Complaint. Defendant Scaife is also responsible for certain events in count -6 of Complaint.

Defendant D. Martinez #97 was employed as the lieutenant of Division -10 - Cook County of Corrections and was present at alleged events. Defendant Martinez #97 also approved alleged events by signing ticket instead of investigating, there, Defendant Martinez #97 is responsible for certain of the claimed events that occurred during the time indicated in court -2 of Complaint.

**Defendant Collins was employed as the Sergeant of Division 10 at Cook County Department of Corrections and was called to investigate the alleged events, and was the recipient of several Complaints made by plaintiff, as such Defendant Collin knew or should have known that these incidents occurred, and took no steps to stop these occurrences. Defendant is thus responsible for the claimed acts in count -2 of Complaint.**

**Defendant Carter was employed as an correctional officer of Division-10 Cook County Department of Corrections during the time indicated and was the one behind writing plaintiff the first bogus ticket that trigger said events, therefore, Defendant Carter#1169 is thus directly responsible for the claimed act in count-2 of complaint.**

**Defendant Kelly #3199 was employed as an correctional officer at Cook County Department of corrections in division 10 during the time indicated and was the one who wrote plaintiff the second bogus ticket for refusing recreation when he new that this was not true, therefore, he is thus directly responsible for the claimed acts in court - 2 of complaint.**

**Defendants names unledgeable an ticket was employed as hearing board members in Division -10 at Cook County Department of Corrections during the time indicated was the ones responsible for plaintiff doing 14 days in Segregation by not investigating or calling witnesses, therefore defendants are directly responsible for the claimed acts in court -2 of complaint.**

**Defendant Morenci #76 was employed as the Chief of Division- 10 at Cook County Department of Corrections as such, defendant Morenci #76 was the recipient of several complaints or grievance filed by plaintiff and is directly responsible for certain of the claimed events that occurred during the time indicated in court-2 of complaint.**

**Defendant (full name unknown) was employed as the administration of Cermack at Cook County Department of Corrections during the time indicated. Defendant was the supervisor of Cermack and, therefore knew or should have known through grievances of the improper medical care given to the plaintiff defendant is responsible for certain of the claimed events in count-3 of complaint.**



**Defendant Dr. Mansour and Dr. Dunlap was employed as doctors of Division-10 at Cook County Department of Corrections and is directly responsible for the inadequate medical care received by the plaintiff, defendant is thus responsible for certain of the claimed events that occurred during the time indicated in count-3 of complaint.**

**Defendant Ms Tate and Maki was employed as nurses of Division -10 at Cook county Department of Corrections and is directly responsible for the inadequate medical care received by the plaintiff, defendants is thus responsible for certain of the claimed events that occurred during the time indicated in count-3 of complaint.**

**Defendant Holly Demiksi and Meeka Chatman was employed by Aramark, and was the recipient of several complaints or grievances made by plaintiff regarding the incidents claimed in count-4 of complaint, as such defendants Holly Demski and Meeka Chatman knew or should have known that these incidents claimed here occurred, and took no steps to stop these occurrences. Defendants Holly Demski and Meeka Chatman is thus responsible for claimed acts in count-4 of complaint.**

**Defendants names unknown was president and C.E.O. of Aramark and in the capacity the overseer of the day to today operation of the facility and, is thus ultimately responsible for the claimed acts in count-4 of complaint.**

**Defendant Michael Sheadan and Tomas during some of the time periods indicated the sheriffs of Cook County Department of Corrections and in that capacity the overseer of the operations of that facility and, is thus ultimately responsible for the occurrence in count 4-5-6 of complaint.**

**Defendant Kelly Baird and Salvador A Godinez during some of the time periods indicated the executive director of Cook county Department of Corrections and that capacity the overseer of the operations of the facility and, is thus ultimately responsible for the occurrence in count4-5-6 of complaint.**

**Defendant Plaxico during all or the majority of the time period indicated the superintendent of division 10. As such defendant Plaxico was the recipient of several**

**Complaints or grievances filed by the plaintiff and, therefore know or should have know that these incidents alleged were occurring he is thus one of the individuals responsible for the occurrence of said events in all count complaint.**

**Defendant George Barreor was employed as head of mailroom at Cook County Department of Corrections, and is directly responsible for the deprivation of cultural reading material, and was the recipient of several complaints or grievances made by the plaintiff defendant is thus responsible for certain of the claimed events that occurred during the time indicated in count-4 of complaint.**

**defendant. Acre was employed as the captain of division 10 at Cook County Department of Corrections during the time indicated and lead the events doing lockdown in count-6 of complaint and, is thus responsible for certain of the claimed events in part of count-6 complaint.**

**Defendant Castro was employed as the Sergeant of Division -10 at Cook County Department of Corrections during the time indicated and lead the events doing lock down in count -6 of compliant, and is thus responsible for certain of the claimed events in part of count-6 of complaint.**

**Defendant Salazar during the time indicated was the Superintendent of division -1 as such defendant Salazar was the recipient of several complaints or grievance filed by the plaintiff, defendant Salazar was acting superintendent for division-10 during the time indicated, and personally had the said event s in part of count -6 of complaint he is thus the one responsible for the occurrence of said events.**

**Defendants Ms. Gracy and Ms Butler was employed as caseworkers or counselors in division- 10 at Cook County Department of Corrections during the time indicated and was the recipient of several complaints and grievances made by the plaintiff regarding the incidents claimed here. As such defendants Ms Gracy and Ms butler knew or should have know that these incidents occurred, and took no step to stoop these occurrences, there defendants is thus responsible for the claimed acts in all counts of complaint.**

**The acts claimed and went alleged each individually and together collectively cased violations of plaintiffs civil rights arising under and protected by the constitution of the United States, as described below.**

**Plaintiff is claiming:**

**1) Violation of his rights arising under the eight and fourteenth amendment of the Constitution of the United States, in that:**

**A) The actions of the defendants inflicted upon the plaintiff a                      and unusual punishment.**

**B) The sections of the defendants constituted a deliberate indifference to the plaintiff serious medical needs, and treatment while housed at Cook County Department of Corrections.**

**C) The actions of the defendants inflicted torture upon the plaintiff by knowingly forcing plaintiff to endure excruciating and debilitating pain and suffering needlessly.**

**D) The action of the defendants deliberate and intentional campaign of lack of proper living condition, treatment, and serious medical needs deprived the plaintiff of his right to protection from torture, ad quarantined by tenets of international law to which the United States of America is a signatory.**

**2) Violation of his right, under the first amendment to the constitution of the United States, in that:**

**A) The action of the defendants to greatly circumscribe cultural and published reading material violates plaintiffs first amendment right.**

**The defendants were individual and collectively in their personal and official capacities, responsible for the above listed violations of the plaintiffs rights in the manner enumerated above.**

**VI. Relief:**

State briefly exactly what you want the court to do for you. Make no legal arguments.  
Cite no cases or statutes.

Claimant is claiming that respondent violated his eight and fourteenth amendment  
right to be free from cruel and unusual punishment and knowingly forcing claimant  
to endure bad treatment and excruciating and debilitating pain and suffering do to  
Plaintiffs serious medical needs. Claimant is also claiming that respondents,  
violated his first amendment right by depriving him of cultural and published  
reading marterial, therefore, claimant is asking for compensatory damages and prays  
this court enter that judgement against the respondents in this sum of \$100.000  
collectively divided as the court seems fit claimant is also seeking punitive  
damages.

**CERTIFICATION**

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this 15 day of 12, 2007

Robert Clark

(Signature of plaintiff or plaintiffs)

ROBERT CLARK

(Print name)

20040096333

(I.D. Number)

P.O. box 089002 Chicago IL. 60608

-Chicago-

(Address)

PART - C

## C.C.D.O.C. DETAINEE GRIEVANCE PROCESSED AS A REQUEST

\* Please note: When processed as a request, PART - B is not applicable. \*

Detainee's Last Name: Clark First Name: RobertID#: 004-0090333 Div: 10 Tier/Living Unit: 2DDate of Request: 4/18/07 Date C.R.W. Received Request: 5/1/07This Request has been processed by: V. Butler C.R.W.

## Summary of Request:

Detainee request assistance with living conditions.  
Detainee is requesting to be allowed to clean his cell.

## Response and/or Action Taken:

Be advised that the Sergeant of your area  
can assist you with getting necessary cleaning  
supplies and provide authorization for the  
officer to allow additional time to clean your  
cell.

Supt. C. Plaxico #11 Joseph C. Plaxico 05/01/07 X  
 (Print name of individual responding) (Signature of individual responding) Date: Div./Dept.

Part-A / Control #: XReferred To: Div 10 / Supt.☒ Processed as a request.

# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE

 Detainee Last Name: CLARK First Name: ROBERT

 ID #: 2004-0096333 Div: 10 Living Unit: 3D Date: 10/11/07

## BRIEF SUMMARY OF THE COMPLAINT:

*[Handwritten summary of the complaint follows on multiple lines, detailing the grievance.]*

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

ACTION THAT YOU ARE REQUESTING:

DETAINEE SIGNATURE: \_\_\_\_\_

C.R.W.'S SIGNATURE: \_\_\_\_\_

DATE C.R.W. RECEIVED: 10/11/07

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.  
All appeals must be made in writing and directly submitted to the Superintendent.

## C.C.D.O.C. DETAINEE GRIEVANCE FORM PROCESSED AS A REQUEST

## Please Note :

- If the detainee is not satisfied with the response and/or attempt at resolving this issue, the detainee may resubmit the concern and it will be processed as a grievance.
- When processed as a request, an appeal of the response and/or action taken cannot be made.
  - When processed as a request, PART-B is not applicable.

Detainee's Last Name: Clark First Name: Robert

ID#: 2004-0096333 Div: 10 Tier/Living Unit: 3D

Date of Request: 10/04/07 Date C.R.W. Received Request: 10/11/07

This request has been processed by: [Signature] C.R.W.

## Summary of Request:

Detainee is requesting a tier change due to  
disparate treatment by said officer.

## Response and/or Action Taken:

All requests resolved by the officer.

LE/Earl J. Tolson  
(Print- name of individual responding)

[Signature]  
(Signature of individual responding)

Date: 10/12/07 Div./Dept. \_\_\_\_\_

Part-A / Control #: XReferred To: Div 10 / Supt.☒ Processed as a request.

## COOK COUNTY DEPARTMENT OF CORRECTIONS DETAINEE GRIEVANCE

Detainee Last Name: Robert ClarkFirst Name: RobertID #: 2004 0096333 Div: 10 Living Unit: 30 Date: 10 / 11 / 07

BRIEF SUMMARY OF THE COMPLAINT: Everysince 3d has been changed to an over 40 tier and we where moved up here we have had problems out of officer Martale she comes in in the morning purposely starting chaos she starts the by sceaming and hollering sometimes calling us old mother fucker, threasting us with tickets and treating us like we are children for no reason at all we do not give her any problems or reasons so treat us in such a fashion. she nick-picks with us all day long just finding little things to try to right people up then after she ran out of personal issues to right us up she came in one morning and told us to take everything out of our windows and we applied. She came back the next day telling us to take pictures off the walls and we applied with that. then the next day she came in telling us to take down chathes lines and we applies with that also. then the next day she came in seaching through cells for milk cartons and styrofoam trays when a sergeant is suppose to be assigned to oversee all tier seaches to assure compliance of the seach procedures. And then to top everything off she came one day and told us that we had to empty our trash bags. she did all of this with the treat of no T.V. phone or a ticket. My point is that she could havetold us this in one day instead of one day at a time and she does it all through the day 4 to 5 times just to aggravate us then tells us to bond out or cop out if we dont like it. Officer Marterie as personal problems and issues that she takes out on us and she is very unprofessional in her job. We hope this matter will be looked into Thank You!

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

We would appreatie if this matter can be looked into and taken seriously . (Thanks You!)

ACTION THAT YOU ARE REQUESTING:

DETAINEE SIGNATURE: \_\_\_\_\_

C.R.W.'S SIGNATURE: \_\_\_\_\_

DATE C.R.W. RECEIVED: 10 / 11 / 07

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.  
All appeals must be made in writing and directly submitted to the Superintendent.



**C.C.D.O.C. DETAINEE GRIEVANCE FORM PROCESSED AS A REQUEST****Please Note :**

- If the detainee is not satisfied with the response and/or attempt at resolving this issue, the detainee may resubmit the concern and it will be processed as a grievance.
- When processed as a request, an appeal of the response and/or action taken cannot be made.
  - When processed as a request, PART-B is not applicable.

Detainee's Last Name:

Clark

First Name:

Robert

ID#:

2001-0096333

Div:

10

Tier/Living Unit:

3D

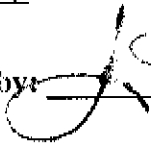
Date of Request:

10/05/07

Date C.R.W. Received Request:

10/12/07

This request has been processed by:



C.R.W.

**Summary of Request:**Detainee alleged unprofessional conduct.**Response and/or Action Taken:**R/10/11/07 Accuses up went into Tier 3/4 Area  
I. Commenced with the incident, All matters resolved.L. J. [illegible]  
(Print- name of individual responding)

(Signature of individual responding)

Date:

11/12/07

Div./Dept.

10

Part-A / Control #

X

Referred To: 11/15/06

# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE REQUEST

 Detainee Last Name: BCLARK First Name: ROBERT

 ID #: 2004 - 0096333 Div.: 10 Living Unit: 2D Date: 11 / 15 / 06

BRIEF SUMMARY OF THE COMPLAINT: ON AUGUST 14, 06 IN A MEMO TO ALL DETAINERS THE COOK COUNTY DEPARTMENT OF CORRECTION TOOK CERTAIN DETAINERS GYM SHOES ON AUGUST 21, 06 STATING THAT THEY DID IT TO IMPROVE THE SAFETY AND SECURITY FOR ALL DETAINERS HOUSED AT (CCDOC). COOK COUNTY OFFICIALS DID NOT TAKE DETAINERS SHOES IN NO DIVISION BUT 1,9,10,11, AND THEY ONLY TOOK HALF OF THOSE DETAINERS SHOES, AND THE ONES THAT THEY DID GIVE SHOES TO THEY ARE T TORE UP ALREADY. THESE COUNTY ISSUED SHOES ONLY LAST A MONTH OR TWO AND SUPERINTENDENT PLAXICO WILL NOT ISSUE DETAINERS ANOTHER PAIR. COOK COUNTY OFFICIALS ALSO DID NOT TAKE THE CONSIDERATION OF CERTAIN DETAINERS MEDICAL CONDITIONS. A DETAINERS MIGHT HAVE FLAT FEET AND CAN NOT WEAR COUNTY ISSUED SHOES. SOME DETAINERS NEED SHOES WITH AN ARCH IN THEM, SOME DETAINERS ALSO HAVE OTHER MEDICAL PROBLEMS THAT PREVENT THEM FROM WEARING SUCH SHOES. THESE SHOES AS CAUSED SWEALING OF SOME DETAINERS FEET, BLISTERS, AND ARCHS TO DROP. I HAVE A SEVERE MEDICAL PROBLEM THAT PREVENTS ME FROM WEARING COUNTY ISSUED SHOES. I HAVE A HIP PROBLEM AND A METAL ROD AND PLATE IN BOTH OF MY LEGS. SOME DETAINERS HAVE MEDICAL PRESCRIPTIONS FOR OUR SHOES BUT NOW COUNTY OFFICIALS WILL NOT HONOR THEM NOW WE ARE TOLD WE NEED A COURT ORDER. DETAINERS RECREATION AS ALSO BEEN CUT SHORT, WE ARE NOT ABLE TO NO LONGER PLAY BASKETBALL, JOG, OR LIFT WEIGHTS. I DONT SEE HOW THIS IMPROVES THE SAFETY OR SECURITY FOR ALL DETAINERS HOUSED AT (CCDOC). DETAINERS ARE STRIPPED SEARCHED WHEN THEY FIRST COME THROUGH RECEIVING- THEN ARE TAKEN TO THIER ASIGNED DIVISIONS WHERE THEY ARE STRIPPED SEARCHED AGAIN AND THEN YOUR SHOES ARE TAKEN FROM YOU BUT AT THIS POINT AND AFTER THREE STRIP SEARCHES IF ANY DETAINERS AS ANY CONTRABAND ON THEM IT AS ALREADY INTERED THE (CCDOC) SHOES HAS TO BE TAKEN IN RECEIVING FOR THESE REASONS. THE (IDOC) TAKE INMATS SHOES IN RECEIVING BUT ALSO RECONIZE THE PROBLEM WITH SUCH SHOES AS TEMPERARY SHOES AND GIVES INMATES THE OPTION OF BUYING SOME MORE SHOES FROM THIER COMMISSARY. THE (CCDOC) CAN ALSO PROVIDE GYM SHOES ON CIMMISSARY WHERE THEY KNOW THERE IS KNOW CO CONTRABAND IN THEM IF THIS IS THIER ONLY REASON WE ARE NOT CONVICTED FELONS WE ARE JUST DETAINERS.

(SALVADOR A. GODINEZ, DIRECTOR, PLAXICO SUPERINTENDENT, AND ALL CCDOC OFFICIAL)  
NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

WE WOULD LIKE TO BE ABLE TO KEEP OUR GYM SHOES OR BUY A PAIR FROM COMMISSARY WHERE (CCDOC)  
ACTION THAT YOU ARE REQUESTING:

KNOW THERE IS NO CONTRABAND IN THEM. THE (CCDOC) DID NOT TAKE DETAINERS SHOES FOR OUR SAFETY AND SECURITY THEY TOOK THEM TO CRIPPLE DETAINERS AND FOR THIER OWN SELFISH REASONS.

 DETAINEE SIGNATURE: [Signature]
C.R.W.'S SIGNATURE: [Signature]DATE C.R.W. RECEIVED: 11/15/06

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.  
All appeals must be made in writing and directly submitted to the Superintendent.

Referred To:

Request  
Dil 10/Sept.

# COOK COUNTY DEPARTMENT OF CORRECTIONS DETAINEE GRIEVANCE

Detainee Last Name: Clark First Name: Robert

ID #: 3004 - 0016333 Div.: 10 Living Unit: 02 Date: 10/1/07

BRIEF SUMMARY OF THE COMPLAINT: On 10/1/07, [illegible] was [illegible] by [illegible] staff.

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

ACTION THAT YOU ARE REQUESTING:

DETAINEE SIGNATURE: [Signature]

C.R.W.'S SIGNATURE: [Signature]

DATE C.R.W. RECEIVED: 10/11/07

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form. All appeals must be made in writing and directly submitted to the Superintendent.

## C.C.D.O.C. DETAINEE GRIEVANCE FORM PROCESSED AS A REQUEST

## Please Note :

- If the detainee is not satisfied with the response and/or attempt at resolving this issue, the detainee may resubmit the concern and it will be processed as a grievance.
- When processed as a request, an appeal of the response and/or action taken cannot be made.
- When processed as a request, PART-B is not applicable.

Detainee's Last Name: Clock First Name: Robert

ID#: 2004-0096333 Div: 10 Tier/Living Unit: 3D

Date of Request: 10/07/07 Date C.R.W. Received Request: 10/10/07

This request has been processed by: [Signature] C.R.W.

## Summary of Request:

Detainee is requesting his pictures that were taken from his property box. He claims that the pictures were from digital slides that were received by CCDOC mail.

## Response and/or Action Taken:

ALL MATTERS RESOLVED BY THE MAILING

[Signature]  
(Print- name of individual responding)

[Signature]  
(Signature of individual responding)

Date: 10/12/07 Div./Dept. \_\_\_\_\_

## C.C.D.O.C. DETAINEE GRIEVANCE PROCESSED AS A REQUEST

\* Please note: When processed as a request, PART - B is not applicable. \*

Detainee's Last Name: CEIKIN First Name: ROBERTID#: 2004-0091-3 Div: 10 Tier/Living Unit: 2DDate of Request: 11/15/06 Date C.R.W. Received Request: 11/27/06This Request has been processed by: [Signature] C.R.W.

## Summary of Request:

Detainee is requesting the physical plant be allowed to  
keep their gym shoes or be able to buy them from the  
store.

## Response and/or Action Taken:

Be advised that those inmates with valid medical  
documentation have been re-issued their shoes.  
Also there are now new shoes to be issued  
to other detainees. Gym shoes will not be  
placed on commissary.

Supt. C. PLAXICO <sup>#14</sup> [Signature] Date: 11/27/06 Div./Dept. X  
 (Print- name of individual responding) (Signature of individual responding)

## C.C.D.O.C. DETAINEE GRIEVANCE PROCESSED AS A REQUEST

\* Please note: When processed as a request, PART - B is not applicable. \*

Detainee's Last Name: Clark First Name: RobertID#: 2004-2046333 Div: 10 Tier/Living Unit: 2DDate of Request: 3/21/07 Date C.R.W. Received Request: 3/22/07This Request has been processed by: V Butler C.R.W.

## Summary of Request:

Detainee request that officer treat them (high side)  
fairly.

## Response and/or Action Taken:

Please address your concerns with the Sergeant  
of your AREA. If that Sergeant can't  
address your concerns then the shift commander  
or myself will conduct follow up.Supt. C. Plaxico #14 Dept. C. Plaxico Date: 03/23/07 Div./Dept. X  
(Print name of individual responding) (Signature of individual responding)

**C.C.D.O.C. DETAINEE GRIEVANCE / REFERRAL & RESPONSE**

\*EMERGENCY GRIEVANCES ARE THOSE INVOLVING AN IMMEDIATE THREAT TO THE WELFARE OR SAFETY OF A DETAINEE\*

Detainee's Last Name: Clark First Name: Robert ID#: 204-1096333Is This Grievance An Emergency? YES ☐ NO ☒C.R.W.'S Summary Of The Complaint: Detainee alleges he has been denied his skin medication.C.R.W. Referred Griev. To: Cemrak Date Referred: 3/14/07Response Statement: Referred to Divisional Physician & Patient Care ServicesC. Smith (print - name of individual responding to this griev.) [Signature] Date: 3/15/07 Div./Dept. C115  
(signature of individual responding to this griev.)Supt. C. Plaxico #14 (print - name of Supt. / Designee / Dept. Admin.) [Signature] Date: 03/16/07 Div./Dept. 10  
(signature of Supt. / Designee / Dept. Admin.)L. Whipple (print - name of Prog. Serv. Admin. / Asst. Admin.) [Signature] Date: 3/15/07  
(signature of Prog. Serv. Admin. / Asst. Admin.)Date Detainee Received Response: 3/14/07 Detainee Signature: Robert Clark**REQUEST FOR AN APPEAL**

\*APPEALS MUST BE MADE WITHIN 14 DAYS OF THE DATE THE DETAINEE RECEIVED THE RESPONSE\*

Date Detainee Request For An Appeal:      /      /     Detainee's Basis For An Appeal:     Appeal Board's Acceptance Of Detainee's Request: YES ☐ NO ☐Appeal Board's Reasoning / Decision / Recommendation To The Superintendent Or Administrator:     Appeal Board's Signatures / Dates:     Date Detainee Rec.'d the Appl. Bd.'s Response:      /      /      Detainee Signature:     GRIEVANCE CODE(S): (      ) (      ) (      ) (      )

(WHITE COPY - PROG. SERV.) (YELLOW COPY - C.R.W.) (PINK COPY - DETAINEE) (GOLDENROD COPY - DIVISION/SUPT. OFFICE)

**C.C.D.O.C. DETAINEE GRIEVANCE / REFERRAL & RESPONSE**

\*EMERGENCY GRIEVANCES ARE THOSE INVOLVING AN IMMEDIATE THREAT TO THE WELFARE OR SAFETY OF A DETAINEE\*

Detainee's Last Name: Clark First Name: Robert ID#: 2004-1696023Is This Grievance An Emergency? YES ☐ NO ☒C.R.W.'S Summary Of The Complaint: Detainee alleges lack of medical attentionC.R.W. Referred Griev. To: CCHS Date Referred: 02/06/07Response Statement: Referred to Patient Care Services & Medical Services

C. Smith (print - name of individual responding to this griev.) Date: 2/8/07 Div./Dept. CCHS  
(signature of individual responding to this griev.)

Supt. C. Plaxico #14 (print - name of Supt. / Designee / Dept. Admin.) Date: 02/09/07 Div./Dept. X  
(signature of Supt. / Designee / Dept. Admin.)

(signature of Prog. Serv. Admin. / Asst. Admin.) Date: 2/18/07  
 (print - name of Prog. Serv. Admin. / Asst. Admin.) (signature of Prog. Serv. Admin. / Asst. Admin.)

Date Detainee Received Response: 1/17/07 Detainee Signature: Robert Clark**REQUEST FOR AN APPEAL**

\*APPEALS MUST BE MADE WITHIN 14 DAYS OF THE DATE THE DETAINEE RECEIVED THE RESPONSE\*

Date Detainee Request For An Appeal:     /     /    Detainee's Basis For An Appeal:    Appeal Board's Acceptance Of Detainee's Request: YES ☐ NO ☐Appeal Board's Reasoning / Decision / Recommendation To The Superintendent Or Administrator:    Appeal Board's Signatures / Dates:    Date Detainee Rec.'d the Appl. Bd.'s Response:     /     /     Detainee Signature:    GRIEVANCE CODE(S): (     ) (     ) (     ) (     )

(WHITE COPY - PROG. SERV.) (YELLOW COPY - C.R.W.) (PINK COPY - DETAINEE) (GOLDENROD COPY - DIVISION/SUPT. OFFICE)



**C.C.D.O.C. DETAINEE GRIEVANCE / REFERRAL & RESPONSE**

\*EMERGENCY GRIEVANCES ARE THOSE INVOLVING AN IMMEDIATE THREAT TO THE WELFARE OR SAFETY OF A DETAINEE\*

Detainee's Last Name: Smith First Name: Robert ID#: 214-1096-3Is This Grievance An Emergency? YES ☐ NO ☒C.R.W.'S Summary Of The Complaint: Detainee alleges he has not been receiving his medication.C.R.W. Referred Griev. To: RELATIVE TO THE GRIEVANCE Date Referred: 10/24/06

Response Statement: \_\_\_\_\_

Date: 1/1/ Div./Dept: 6(print - name of individual responding to this griev.) (signature of individual responding to this griev.)  
Supt. C. Phaxice #111 Supt. C. Phaxice #111 Date: 10/30/06 Div./Dept: X  
(print - name of Supt. / Designee / Dept. Admin.) (signature of Supt. / Designee / Dept. Admin.)(print - name of Prog. Serv. Admin. / Asst. Admin.) (signature of Prog. Serv. Admin. / Asst. Admin.)  
J. Muelke J. Muelke Date: 10/27/06  
(print - name of Prog. Serv. Admin. / Asst. Admin.) (signature of Prog. Serv. Admin. / Asst. Admin.)Date Detainee Received Response: / / Detainee Signature: \_\_\_\_\_**REQUEST FOR AN APPEAL**

\*APPEALS MUST BE MADE WITHIN 14 DAYS OF THE DATE THE DETAINEE RECEIVED THE RESPONSE\*

Date Detainee Request For An Appeal: / /

Detainee's Basis For An Appeal: \_\_\_\_\_

Appeal Board's Acceptance Of Detainee's Request: YES ☐ NO ☐

Appeal Board's Reasoning / Decision / Recommendation To The Superintendent Or Administrator: \_\_\_\_\_

Appeal Board's Signatures / Dates: \_\_\_\_\_

Date Detainee Rec.'d the Appl. Bd.'s Response: / / Detainee Signature: \_\_\_\_\_

GRIEVANCE CODE(S): ( ) ( ) ( ) ( )

\*EMERGENCY GRIEVANCES ARE THOSE INVOLVING AN IMMEDIATE THREAT TO THE WELFARE OR SAFETY OF A DETAINEE\*

\*APPEALS MUST BE MADE WITHIN 14 DAYS OF THE DATE THE DETAINEE RECEIVED THE RESPONSE\*

(WHITE COPY - PROG. SERV.) (YELLOW COPY - C.R.W.) (PINK COPY - DETAINEE) (GOLDENROD COPY - DIVISION/SUPT. OFFICE)

**C.C.D.O.C. DETAINEE GRIEVANCE / REFERRAL & RESPONSE**

\*EMERGENCY GRIEVANCES ARE THOSE INVOLVING AN IMMEDIATE THREAT TO THE WELFARE OR SAFETY OF A DETAINEE\*

Detainee's Last Name: Smith First Name: Robert ID#: 601-1111Is This Grievance An Emergency? YES ☐ NO ☒C.R.W.'S Summary Of The Complaint: Refer to medical servicesC.R.W. Referred Griev. To: Comptroller Date Referred: 1/2/07Response Statement: Refer to Medical Services

(print - name of individual responding to this griev.)

(signature of individual responding to this griev.)

Date: 3/29/07 Div./Dept. CHS

(print - name of Supt. / Designee / Dept. Admin.)

(signature of Supt. / Designee / Dept. Admin.)

Date: 3/29/07 Div./Dept. CHS

(print - name of Prog. Serv. Admin./ Asst. Admin.)

(signature of Prog. Serv. Admin./ Asst. Admin.)

Date: 3/29/07Date Detainee Received Response: 1/2/07 Detainee Signature: [Signature]**REQUEST FOR AN APPEAL**

\*APPEALS MUST BE MADE WITHIN 14 DAYS OF THE DATE THE DETAINEE RECEIVED THE RESPONSE\*

Date Detainee Request For An Appeal: 1/2/07Detainee's Basis For An Appeal: Appeal Board's Acceptance Of Detainee's Request: YES ☐ NO ☐Appeal Board's Reasoning / Decision / Recommendation To The Superintendent Or Administrator: Appeal Board's Signatures / Dates: Date Detainee Rec.'d the Appl. Bd.'s Response: / / Detainee Signature: 

GRIEVANCE CODE(S): ( ) ( ) ( ) ( )

PART - C

## GRIEVANCE PROCESSED AS A REQUEST

Processed as a request, PART - B is not applicable. \*

First Name:

Robert

96333

Div: 10

Tier/Living Unit:

2D

Date C.R.W. Received Request:

2/15/07

This Request has been processed by:

V. Butler

C.R.W.

## Summary of Request:

Detainee request to receive his priority mail  
Once it reaches the mail.

## Response and/or Action Taken:

Mailroom receives & delivers mail on the daily basis  
Priority Mail does not come in next day, only Express  
mail does. Mailroom delivers mail to all the divisions  
on the daily basis and has no control over the time or  
manner the mail is distributed. A package (Priority) received  
2-20-07 was sent back to sender (envelopes inside).

George T. Barbers  
(Print- name of individual responding)

(Signature of individual responding)

Date:

3/6/07

Div./Dept. 6

## C.C.D.O.C. DETAINEE GRIEVANCE PROCESSED AS A REQUEST

\* Please note: When processed as a request, PART - B is not applicable. \*

Detainee's Last Name: CLARK First Name: ROBERTID#: 2004-0096333 Div: 10 Tier/Living Unit: 2DDate of Request: 11/7/06 Date C.R.W. Received Request: 11/14/06This Request has been processed by: S. Allen C.R.W.

## Summary of Request:

Detainee would like to have an explanation regarding detainees not receiving ethnic magazines.

## Response and/or Action Taken:

Unfortunately the MAGAZINES MA/room processes have a high content of sexual Advancing Nudity, pictures of drugs or Guns or Gang Signs. ~~these~~ these items violates CCDOC Regulation. Any MAGAZINES containing these irregularities will be returned to sender.

GEORGE LARRERO

(Print- name of individual responding)

(Signature of individual responding)

Date: 11/28/06 Div./Dept. 6

## C.C.D.O.C. DETAINEE GRIEVANCE PROCESSED AS A REQUEST

\* Please note: When processed as a request, PART - B is not applicable. \*

Detainee's Last Name: CLARK First Name: ROBERTID#: 2004 - 0096333 Div: 10 Tier/Living Unit: 2DDate of Request: 11 / 7 / 06 Date C.R.W. Received Request: 11 / 14 / 06This Request has been processed by: S. Allen C.R.W.

## Summary of Request:

Detainee requests ~~who is~~ to know who is responsible for commissary for CCDOC and why detainees can no longer buy a toothbrush.

## Response and/or Action Taken:

Re CCDOC inmates are not allow to purchase tooth brushes from commissary. CCDOC supplies the inmates with this

Meekha Chalmers  
(Print- name of individual responding)

[Signature]  
(Signature of individual responding)

Date: 11 / 16 / 06 Div./Dept. 200

**C.C.D.O.C. DETAINEE GRIEVANCE PROCESSED AS A REQUEST**

\* Please note: When processed as a request, PART - B is not applicable. \*

Detainee's Last Name: Clark First Name: Don

ID#: 500-0096023 Div: 10 Tier/Living Unit: 1A

Date of Request: 7/10/07 Date C.R.W. Received Request: 7/10/07

This Request has been processed by: J. L. Martinez C.R.W.

**Summary of Request:**

Detainee request for room conditions. Detainee complaint  
that the room temperature in tier 1A is too hot.

**Response and/or Action Taken:**

Re Advised that on Aug 2, 2007, Div. 10  
ENGINEER went Tier 10 Tier and checked  
all units and adjusted the climate.

To my knowledge this matter has been  
properly addressed.

Dept. C. R. Case #14 Dept. C. R. Case #14 Date: 07/03/07 Div./Dept. 10  
(Print name of individual responding) (Signature of individual responding)

**C.C.D.O.C. DETAINEE GRIEVANCE / REFERRAL & RESPONSE**

\*EMERGENCY GRIEVANCES ARE THOSE INVOLVING AN IMMEDIATE THREAT TO THE WELFARE OR SAFETY OF A DETAINEE\*

Detainee's Last Name: Clark First Name: Robert ID#: 204-119833Is This Grievance An Emergency? YES ☐ NO ☒C.R.W.'S Summary Of The Complaint: Detainee alleges he is beingdenied some library services.C.R.W. Referred Griev. To: Library Services Date Referred: 3-1-9-107Response Statement: Detainee was told that according to the rulesof the prison that he was not allowed to use the librarybecause he was not a member of the library and he was notallowed to use the library services.1-10-07 Date: 01/07/07 Div./Dept. 10

(print - name of individual responding to this griev.) (signature of individual responding to this griev.)

CHIEF D. APPROX #6 1-10-07 Date: 04/07/07 Div./Dept. 10

(print - name of Supt. / Designee / Dept. Admin.) (signature of Supt. / Designee / Dept. Admin.)

V. Alexander 1-10-07 Date: 4/12/07

(print - name of Prog. Serv. Admin. / Asst. Admin.) (signature of Prog. Serv. Admin. / Asst. Admin.)

Date Detainee Received Response: 4/14/07 Detainee Signature: Robert Clark**REQUEST FOR AN APPEAL**

\*APPEALS MUST BE MADE WITHIN 14 DAYS OF THE DATE THE DETAINEE RECEIVED THE RESPONSE\*

Date Detainee Request For An Appeal: 4/14/07Detainee's Basis For An Appeal: 102. Detainee was told he was not rightand he was not allowed to use the library services.He was told that he was not allowed to use the library servicesbecause he was not a member of the library and he was notallowed to use the library services.Appeal Board's Acceptance Of Detainee's Request: YES ☐ NO ☒

Appeal Board's Reasoning / Decision / Recommendation To The Superintendent Or Administrator:

Response to Staid - if detainee feels heis still being denied access - Re-grive the issue.Appeal Board's Signatures / Dates: 1-8-7 5/8/07Date Detainee Rec.'d the Appl. Bd.'s Response: 1/1 Detainee Signature: Robert Clark

GRIEVANCE CODE(S): ( ) ( ) ( ) ( )



PART - C

## C.C.D.O.C. DETAINEE GRIEVANCE PROCESSED AS A REQUEST

\* Please note: When processed as a request, PART - B is not applicable. \*

Detainee's Last Name: Robert First Name: ClarkID#: 204- 0096333 Div: 10 Tier/Living Unit: 2DDate of Request: 3/13/07 Date C.R.W. Received Request: 3/14/07This Request has been processed by: V. Butler C.R.W.

## Summary of Request:

Detainee request to go to the Law Library  
more often

## Response and/or Action Taken:

Detainee request - Clark present Law Library  
on 3/15/07. Detainee was scheduled  
for the 3/15/07 request and court date.

(Print- name of individual responding)

(Signature of individual responding)

Date: 3/15/07Div./Dept. 1000

**C.C.D.O.C. DETAINEE GRIEVANCE / REFERRAL & RESPONSE**

\*EMERGENCY GRIEVANCES ARE THOSE INVOLVING AN IMMEDIATE THREAT TO THE WELFARE OR SAFETY OF A DETAINEE\*

Detainee's Last Name: Clark First Name: Robert ID#: 264-19633Is This Grievance An Emergency? YES ☐ NO ☒C.R.W.'S Summary Of The Complaint: Detainee alleges lack of access toC.R.W. Referred Griev. To: Prison "gangs" Date Referred: 6/19/07Response Statement: I am a member of the prison "gangs" and I have been(print - name of individual responding to this griev.) Date: 7/13/07 Div./Dept. 11(print - name of Supt. / Designee / Dept. Admin.) Date: 7/13/07 Div./Dept. 11(print - name of Prog. Serv. Admin. / Asst. Admin.) Date: 7/13/07Date Detainee Received Response: 7/1/07 Detainee Signature: [Signature]**REQUEST FOR AN APPEAL**

\*APPEALS MUST BE MADE WITHIN 14 DAYS OF THE DATE THE DETAINEE RECEIVED THE RESPONSE\*

Date Detainee Request For An Appeal: 7/13/07Detainee's Basis For An Appeal: I am a member of the prison "gangs" and I have beenAppeal Board's Acceptance Of Detainee's Request: YES ☐ NO ☒

Appeal Board's Reasoning / Decision / Recommendation To The Superintendent Or Administrator:

Original Response to stand - CDOC has  
all evidence documentation per program services

Appeal Board's Signatures / Dates:

[Signature] 7-10-7Date Detainee Rec'd the Appl. Bd.'s Response: 7/1/07 Detainee Signature: [Signature]

GRIEVANCE CODE(S): ( ) ( ) ( ) ( )

(WHITE COPY - PROG. SERV.) (YELLOW COPY - C.R.W.) (PINK COPY - DETAINEE) (GOLDENROD COPY - DIVISION/SUPT. OFFICE)

# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE REQUEST

Detainee Last Name: CLARK First Name: ROBERT

ID #: 7004 - 0096333 Div.: 10 Living Unit: 20 Date: 11/17/06

### BRIEF SUMMARY OF THE COMPLAINT:

*Since August 1, 2005 I have up to date up to date revenue for the State Sales. I have also paid for my detainee's food items. The commissary is not working through Account is unprofessional they are always missing something in your buy order. I placed an order that I did not order and it took three to four weeks to get it back. I was told through other detainees that this was a cook county issue. I was told that the commissary was not working properly. I was told that the commissary was not working properly. I was told that the commissary was not working properly.*

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

*I would like to know who is responsible for the commissary at*

ACTION THAT YOU ARE REQUESTING:

DETAINEE SIGNATURE: Robert Clark

C.R.W.'S SIGNATURE: S. Allen

DATE C.R.W. RECEIVED: 11/14/06

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form. All appeals must be made in writing and directly submitted to the Superintendent.

Part-A / Control #: XReferred To: MAILROOM

# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE REQUEST

 Detainee Last Name: CLARK First Name: ROBERT

 ID #: 2004-0096333 Div.: 10 Living Unit: 2D Date: 11/17/06

 BRIEF SUMMARY OF THE COMPLAINT: Off. Shively May 1 2006

that while in no period on all wings with  
30 black and white magazines that (CCDOC)  
stopped from coming in. (CCDOC) gave no reason  
for stopping these magazines from coming in. I see  
20 black and white magazines that are not  
available to the public.

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

I would like to know who was behind stopping these  
 ACTION THAT YOU ARE REQUESTING:

magazines and why and would like to know the reason  
for it.

 DETAINEE SIGNATURE: Robert Clark

 C.R.W.'S SIGNATURE: S Allen

 DATE C.R.W. RECEIVED: 11/14/06

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.  
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# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE

Detainee Last Name: CLARK First Name: ROBERT

ID #: 2004-0046333 Div.: 10 Living Unit: 20 Date: 2/1/107

### BRIEF SUMMARY OF THE COMPLAINT:

My mother sends me  
priority mail, but I never get my mail until  
weeks later. The United States Postal Service  
guarantees that if you are sent priority  
mail, it will get out it over night. George Berrero who  
runs the mail room does not take the time  
to make sure detainees that are sent priority  
mail gets it the next day. All George Berrero  
says to do is separate regular mail from  
priority mail then make sure detainees that  
is sent priority mail get it the next day.

All Detainees and Staff

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

I want to see if my priority mail over night  
ACTION THAT YOU ARE REQUESTING:

mail - it gets it over night. Thank You.

DETAINEE SIGNATURE: Robert Clark.

C.R.W.'S SIGNATURE: V Butler

DATE C.R.W. RECEIVED: 2/1/5/07

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.  
All appeals must be made in writing and directly submitted to the Superintendent.

## COOK COUNTY DEPARTMENT OF CORRECTIONS DETAINEE GRIEVANCE

Detainee Last Name: CLARK First Name: ROBERTID #: 2004-0096333 Div.: 10 Living Unit: 2D Date: 3 12 9 107

BRIEF SUMMARY OF THE COMPLAINT: I had a tooth pulled over a month ago. I had two bad teeth at the time but the dentist only pulled one of them. She told me that she would call me over back over to see her for a check-up in two weeks and that she would pull the other tooth then that has been about two months now my cellie has been to see the dentist four times in the last month just for a check-up for a tooth he got pulled two months ago. I have a bad tooth that hurts REAL bad. + needs to be pulled I had officer ZALESKI to call over there for me eight times in the last month and I would told <sup>earr time</sup> that I was scheduled for the next week but never was called. on 3-24-07 I was told that I was scheduled for ~~3-24-07 but that is not true there is no longer a dentist~~ OFFICER ZALESKI

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

I need my tooth pulled so hard REAL bad  
ACTION THAT YOU ARE REQUESTING:DETAINEE SIGNATURE: Robert ClarkC.R.W.'S SIGNATURE: [Signature]DATE C.R.W. RECEIVED: 4 12 107

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form. All appeals must be made in writing and directly submitted to the Superintendent.

# COOK COUNTY DEPARTMENT OF CORRECTIONS DETAINEE GRIEVANCE

Detainee Last Name: CLARK First Name: ROBERT  
ID #: 2004-0096333 Div.: 10 Living Unit: 20 Date: 3/13/07

BRIEF SUMMARY OF THE COMPLAINT: I HAVE BEEN COMPLAINTING  
ABOUT NOT GETTING MY SKIN MEDICATION FOR  
A YEAR NOW THIS IS IN MY FORTH GRIEVANCE MS  
TATE AND MAYNE REFUSED TO ORDER THEM FOR ME.  
I SEE SEVERAL DETAINEES HERE ON MY WING  
THAT GET THE SAME SKIN CREAMS AND I DO NOT  
HAVE A PROBLEM WITH GETTING THEM. ALL YOU  
HAVE TO DO IS CHECK MY MEDICAL CART AND  
YOU WILL SEE I HAVE NOT BEEN GETTING MY  
SKIN MEDICATIONS. I AM TIRED OF WRITING GRIEVANCES  
I WISH SOMEONE DO SOMETHING ABOUT MS TATE AND  
MAYNE NOT ORDERING MY SKIN MEDICATIONS.

CHECK MY CART FOR THE LAST YEAR.  
NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

I WOULD LIKE FOR ANOTHER NURSE TO SPEAK TO ME MY  
ACTION THAT YOU ARE REQUESTING:  
medication. I have been going through this with MS TATE  
AND MAYNE FOR A YEAR

DETAINEE SIGNATURE: Robert Clark

C.R.W.'S SIGNATURE: V. Billu

DATE C.R.W. RECEIVED: 3/14/07

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.  
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Part-A / Control #: 2117 X (2) 18Referred To: Cermak

# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE

 Detainee Last Name: CLARK First Name: ROBERT

 ID #: 2004-0096333 Div.: 10 Living Unit: 20 Date: 12/2/07

BRIEF SUMMARY OF THE COMPLAINT: EVERYTIME I TURN IN A MEDICAL FORM TO THIS STATE OR MAYINE TO SEE THE DOCTOR THEY NEVER TURN IT IN THEY TURN IN THE MEDS THEY THINK WHO SHOULD SEE THE DOCTOR I HAVE BEEN WAITING FOR OVER SEVERAL MONTHS I WAS TOLD BY THE NURSE THAT NEWAYS WING TO SEND ME TO A SPINE SPECIALIST BUT I STILL HAVE NOT SEEN ONE YET. I THINK I HAVE A BLOOD STAIN IN MY LEFT LEG I NEED IT SCANNED TO SEE IF I HAVE A BLOOD STAIN IN IT, IT HURT MEAL BAD SOMETIMES I CAN'T WALK

DOCTOR NURSE  
NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

I would like to see a doctor  
ACTION THAT YOU ARE REQUESTING:

See a doctor

 DETAINEE SIGNATURE: Robert Clark

 C.R.W.'S SIGNATURE: Vernon Butler DATE C.R.W. RECEIVED: 02/06/07

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form. All appeals must be made in writing and directly submitted to the Superintendent.



# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE

Detainee Last Name: CLARK First Name: ROBERT

ID #: 204-0096333 Div.: 10 Living Unit: 2D Date: 3/23/07

BRIEF SUMMARY OF THE COMPLAINT: I have a severe pain in my left  
leg running from my thigh, hip and down to my  
ankle. I have been complaining about this pain for  
over a year and I have not seen a doctor and  
still I have not got any medical action for my left  
leg and no way in the whole world I suppose to  
be in this much pain for over a year and you have  
to look at my medical record and see how long  
I have been complaining all I have been receiving  
for my condition is all types of pain medication.  
I think I have a blood clot in it I've told the  
doctor this twice.

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT: Doctor nurses

ACTION THAT YOU ARE REQUESTING: I wish someone tell me what's wrong with my leg

DETAINEE SIGNATURE: Robert Clark

C.R.W.'S SIGNATURE: V. Butler DATE C.R.W. RECEIVED: 3/27/07

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.  
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# COOK COUNTY DEPARTMENT OF CORRECTIONS DETAINEE GRIEVANCE

Detainee Last Name: ROBERT First Name: CLARK #14

ID #: 2004-0096333 Div.: 10 Living Unit: 20 Date: 3 11/3 107

## BRIEF SUMMARY OF THE COMPLAINT:

During the past several  
months, the staff and the white inmates  
locked up during the time of religious services  
are denied the privilege to worship and  
participate in these services. All are now  
allowed to go out and see the staff in the  
morning and in the evening. The staff  
will come out that evening and the following  
morning also. Whenever staff has had the morning  
must be locked up and held for about 24 hours  
until 3:30 or 4:00 the following day. If the officers  
take a lunch break, they are only out a total of 4 hours  
every 24 hours.

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

Everyone here in Div. 10  
We would like to come out in the morning and evening.

ACTION THAT YOU ARE REQUESTING:

DETAINEE SIGNATURE:

Robert Clark

C.R.W.'S SIGNATURE:

V. Butler

DATE C.R.W. RECEIVED:

3/14/07

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.  
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Part-A / Control #:

Referred To:

REX HEST  
Supt Div 10

# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE

Detainee Last Name: CLARK First Name: ROBERT

ID #: 2004-0094333 Div.: 10 Living Unit: 20 Date: 5/12/07

BRIEF SUMMARY OF THE COMPLAINT: we are not allow to clean

our cells I have had this problem since I

have been here at the Cook County Jail since

since they have started this half and half

cell in really not able to clean our cells

has not so clean in months unless we try

to do it by hand on our head and knees.

They have started putting three people in the cell.

The cell has no ventilation. They are dirty,

smelly and hot with dirt everywhere.

PIA, ID. and other detainees in 20

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

That we are allow to clean our cells and we

ACTION THAT YOU ARE REQUESTING:

and ventilation

DETAINEE SIGNATURE: ROBERT CLARK

C.R.W.'S SIGNATURE:

V. Butler

DATE C.R.W. RECEIVED:

5/1/07

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.  
All appeals must be made in writing and directly submitted to the Superintendent.

Part A / Controls

Referred To: Sgt. [unclear]

# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE

Detainee Last Name: Plant Clark First Name: \_\_\_\_\_

ID #: 9004 SC 96232 Div.: 10 Living Unit: 1-11 Date: 7/19/2007

### BRIEF SUMMARY OF THE COMPLAINT:

Plaintiff is confined to cell 1126 for 24 hours. During this time, the temperature is high, with a high of 110 degrees. There is no fan on the inside of the cell. The 90 degrees outside, so it's got to be 110 degrees in plaintiff's cell. Plaintiff has talked to Sgt. [unclear] and several officers and admissions, but the engineers can be contacted about this problem. Plaintiff has also informed Sgt. [unclear] that he has high blood pressure.

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

ACTION THAT YOU ARE REQUESTING:

**DETAINEE SIGNATURE:** \_\_\_\_\_

C.R.W.'S SIGNATURE: \_\_\_\_\_

DATE C.R.W. RECEIVED: 7/19/07

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form. All appeals must be made in writing and directly submitted to the Superintendent.



COOK COUNTY DEPARTMENT OF CORRECTIONS  
**DETAINEE GRIEVANCE** *do not treat*

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Referred To:

COOK COUNTY DEPARTMENT OF CORRECTIONS  
DETAINEE GRIEVANCE

Detainee Last Name: E. CLARK First Name: ROBERT

ID #: 2004-0096333 Div.: 10 Living Unit: 20 Date: 3 23 107

BRIEF SUMMARY OF THE COMPLAINT: Since I have been

[illegible]

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

ACTION THAT YOU ARE REQUESTING: I would possibly like to know how we can

and I would like to go to the  
and I would like to go to the

**DETAINEE SIGNATURE:** Robert Cook

C.R.W.'S SIGNATURE: *[Signature]*

DATE C.R.W. RECEIVED: 3/12/77

***Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form. All appeals must be made in writing and directly submitted to the Superintendent.***



Part-A / Control #:

2007 X / 237

Referred To: Program Services

# COOK COUNTY DEPARTMENT OF CORRECTIONS DETAINEE GRIEVANCE

Detainee Last Name: Clark First Name: Robert

ID #: 2004-0096333 Div.: 10 Living Unit: 20 Date: 6/11/07

BRIEF SUMMARY OF THE COMPLAINT: I have been putting in forms to go to the law library every other day but Ms. Canada refuses to call me to the law library. But I see the same guys on my wing going there every week. Every since I wrote her up the first time she has been purposely denying me access to the law library. She also made up a bogus attendance card to justify my first grievance and when she do call me to the law library she purposely gives me copies of cases that I did not request. I truly hope someone will look into this matter sometime I put in a grievance there nothing has come from the m.t.h.

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

I would like to go to the library and to Ms. Canada

ACTION THAT YOU ARE REQUESTING:

she has a bad attitude she should not be working there.

DETAINEE SIGNATURE: Robert Clark

C.R.W.'S SIGNATURE:

V. Butler

DATE C.R.W. RECEIVED:

6/18/07

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.  
All appeals must be made in writing and directly submitted to the Superintendent.



Part-A / Control #:

Referred To:

REQUEST  
Lm - Library

# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE

 Detainee Last Name: ROBERT First Name: CLARK

 ID #:                      Div.: 15 Living Unit: 20 Date: 1/15/07

### BRIEF SUMMARY OF THE COMPLAINT:

*[Handwritten summary of complaint follows]*

### NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

*[Handwritten name follows]*

### ACTION THAT YOU ARE REQUESTING:

*[Handwritten request follows]*

### DETAINEE SIGNATURE:

C.R.W.'S SIGNATURE:

*[Handwritten signature]*

DATE C.R.W. RECEIVED:

*[Handwritten date: 1/14/07]*

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.  
All appeals must be made in writing and directly submitted to the Superintendent.

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Referred To: SUPERINTENDENT

# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE REQUEST

Detainee Last Name: ROBERT CLARK First Name: CLARK

ID #: 2004 - 0096333 Div.: 10 Living Unit: 20 Date: 10 / 10 / 06

BRIEF SUMMARY OF THE COMPLAINT: ON 8/16/06 THERE WAS A MEMO PLACED ON ALL WING BY SUPERINTENDENT PLAXICO STATING THAT DETAINEES WILL NOT BE ALLOWED TO HAVE CLOTHES LINES IN THEIR CELLS ANYMORE AND DETAINEES ALSO ARE NOT ALLOWED TO HANG THEIR CLOTHES IN THE DAYROOM. EVERY MORNING DETAINEES ARE INFORMED THIS BY THE C/O THAT IS ASSIGNED TO OUR WING. THIS DOES NOT MAKE ANY SENCE BECAUSE WHEREVER WE SUSPOSE TO HANG OUR WRT UNDERWEAR, T-SHIRTS, AND SOCK WHEN WE WASH THEM. THE COUNTY JAIL DOES NOT PROVIDE ANY MEANS OF WASHING AND DRYING DETAINEES UNDERCLOTHES. WE ARE ALSO NOT ALLOWED TO BRING PAPER BAGS, PALES ECT. OUT OF OUR CELLS DETAINEES USED TO BRING THEIR BAGS OR PALES OUT TO CARRY THEIR PERSONAL HYGIENE ITEMS TO THE SHOWER ITEMS LIKE SOAP, DEODERANT, LOTION, TOOTH PASTE AND TOOTH BRUSH, TOWEL FACE TOWEL, CLEAN UNDERCLOTHES. HOW ARE WE SUSPOSE TO CARRY ALL OUR STUFF TO THE SHOWER WE ARE LOCKED OUT OF OUR CELLS ALL DAY. WHEN I ASKED PLAXICO

ABOUT THESE ISSUED HE TOLD US THAT WE CAN PUT OUR STUFF ON THE FLOOR, AND WE CAN TAKE CARE OF OUR PERSONAL HYGIENES IN OUR CELLS.

ALL ADMINASTRATIVE PERSONEL AND DETAINEES HOUSED IN DIX-10.

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

DETAINEES WOULD LIKE TO BE ABLE TO HANG THEIR CLOTHES SOME WHERE WITHOUT BEING HARRASSED ACTION THAT YOU ARE REQUESTING:

OR THE COUNTY TO PROVIDE MEANS OF WASHING AND DRYING DETAINEES CLOTHES. WE WOULD ALSO LIKE TO BE ABLE TO CARRY OUR PERSONAL HYGIENE STUFF TO THE SHOWER IN A BAG OR PALE OR A LAUNDRY BAG PROVIDE BY THE COOK COUNTY JAIL OR ON COMMISSARY THANK YOU.

**DETAINEE SIGNATURE:** [Signature]

C.R.W.'S SIGNATURE: [Signature]

DATE C.R.W. RECEIVED: 10 / 19 / 06

*Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form. All appeals must be made in writing and directly submitted to the Superintendent.*

Referred To:

Supervisory

# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE

Detainee Last Name: CLARK First Name: ROBERT

ID #: 2004-0096333 Div.: 10 Living Unit: Z-D Date: 5-1-17-100

BRIEF SUMMARY OF THE COMPLAINT: I WAS THROWN IN SEG FOR NO REASON AND EVERY SINCE I HAVE BEEN OUT OF SEG MY  
WIFE AS BEEN SHOOK DOWN 4 TIMES IN ONE WEEK MY PERSONAL  
BEHOLDING AS BEEN TAKEN ALL ON THE FLOOR I HAVE PERSONAL  
ITEMS MISSING WE ARE TOLD THAT WE CAN NOT HAVE  
PAPER BAGS OR CLOTHES LINES IN WHEN THE OFFICERS  
OUR CELLS THEY TAKE OUR JARBAKE BAGS OF IF WE HANGS  
IN A bag THEY TAKE OUR PERSONAL BEHOLDING  
AND IF WE HAVE A LINE UP IN OUR CELL TO  
ON THEY TAKE IT DOWN AND IS + THROW  
FLOOR B: THEY ARE 13-14 ALL OVER AGAIN  
ST. AND EVERYONE ON Z-D ST. 1A, ELSON

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

ACTION THAT YOU ARE REQUESTING:

DETAINEE SIGNATURE: \_\_\_\_\_

C.R.W.'S SIGNATURE: \_\_\_\_\_

DATE C.R.W. RECEIVED: \_\_\_\_\_

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form. All appeals must be made in writing and directly submitted to the Superintendent.

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Referred To: \_\_\_\_\_

# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE

Detainee Last Name: CLARK First Name: ROBERT

ID #: 2004-0096333 Div.: 10 Living Unit: 3D Date: 4/26/06

BRIEF SUMMARY OF THE COMPLAINT: ON 4-25-06 I WAS MOVED  
FROM 3D THE OVER 40 wing AT 10.00 clock p.m. FOR  
NO REASON AT ALL. I WAS IN THE LINE TO SEE THE NURSE  
WHEN IT WAS MY TURN I WENT INTO THE ENTER LOCK OFFICER  
SAID CARTER TOLD ME TO GET OUT HIS ENTER LOCK FOR NO  
REASON I TOLD HIM I WANTED TO SEE THE NURSE AFTER I  
SPOKE TO THE NURSE OFFICER CARTER SAID HE WAS GOING  
TO WRITE ME UP AFTER I LEFT THE ENTER LOCK I HAD  
A FEW WORDS WITH AN INMATE NAME JOHN TALOR HE WENT  
INTO THE ENTER LOCK TALK TO OFFICER CARTER. SGT COLLEN  
CAME TO TALK WITH ME AND I HAVE A PROBLEM WITH JOHN I  
DO NOT SGT COLLEN SAID I LEFT AND THAT WAS THAT ON THE  
NEXT DAY AT 10.00 clock I WAS MOVED FOR NO REASON SINCE THAT  
TIME I WROTE THE NURSE ON THAT DAY SGT COLLEN MY INMATE ON THE  
NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

I would like to know why I WAS MOVED and I would like  
 ACTION THAT YOU ARE REQUESTING:

TO BE PLACED BACK IN 3D OVER 40 wing IN CELL 14 I AM A  
VERY CLEAN PERSON I CLEANED THAT CELL FROM TOP TO BOTTOM.

DETAINEE SIGNATURE: Robert Clark

C.R.W.'S SIGNATURE: \_\_\_\_\_

DATE C.R.W. RECEIVED: 4/26/06

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.  
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Referred To: CERMAK

# COOK COUNTY DEPARTMENT OF CORRECTIONS

## DETAINEE GRIEVANCE

 Detainee Last Name: CLARK First Name: ROBERT

 ID #: 2004 - 0096333 Div.: 10 Living Unit: 2D Date: 10 / 11 / 06

### BRIEF SUMMARY OF THE COMPLAINT:

ON SEVERAL ACCASION I ASKED MS. TATE TO ORDER MY SKIN MEDICATION, AND SHE ALWAYS SEEMS TO GET A ATTITUDE ABOUT IT, AND TELLS ME WHEN THEY SEND IT I WILL GET IT, BUT I NEVER RECIEVE MY SKIN MEDICATION. I WAS TOLD BY THE DOCTOR HERE IN DIV-10 AND THE DERMOTOLIGIST AT CERMAK AND SEVERAL OTHER NURSES THAT THESE SKIN CREAMS AS TO BE ORDERED BY THE NURSE AS NEEDED. I ALSO ASKED MS. JEFFERSON, AND THE TWO MALE NURSES BUT I STILL HAVE NOT GOT MY SKIN CREAMS EVERYONE KEEP TELLING TO TELL MY ASIGN NURSE MS. TATE BUT SHE REFUSES TO ORDER THEM. SHE ALSO REFUSES TO TURN IN MY MEDICAL FORMS I HAVE TURNED IN THREE FORMS IN THE LAST MONTH AND I STILL HAVE NOT SEEN THE DOCTOR. I HAVE BEEN GOING THROUGH THIS WITH MS. TATE FOR OVER A YEAR.

THE DOCTOR, MS. JEFFERSON, THE TWO MALE NURSES NAMES UNKNOWN, AND THE DERMOTOLIGIST. I ~~WANT~~ LIKE TO RECIEVE MY SKIN CREAMS ON TIME. THANK YOU. I TOLD ALL OF THEM ABOUT THIS.

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:

I WOULD LIKE TO RECIEVE MY SKIN CREAMS ON TIME AND I WOULD LIKE FOR MS. TATE TO ORDER ACTION THAT YOU ARE REQUESTING:

THEM ON TIME. THANK YOU.

 DETAINEE SIGNATURE: *Robert Clark*

 C.R.W.'S SIGNATURE: *S. Allen*

 DATE C.R.W. RECEIVED: 10 / 19 / 06

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form. All appeals must be made in writing and directly submitted to the Superintendent.

**C.C.D.O.C. DETAINEE GRIEVANCE PROCESSED AS A REQUEST**

\* Please note: When processed as a request, PART - B is not applicable. \*

Detainee's Last Name: CLARK First Name: ROBERTID#: 2004 - 0096333 Div: 10 Tier/Living Unit: 2DDate of Request: 10 / 10 / 06 Date C.R.W. Received Request: 10 / 19 / 06This Request has been processed by: S. Allen C.R.W.**Summary of Request:**

Detainee requests a means of hanging clean clothes to dry and be able to carry personal hygiene products to shower.

**Response and/or Action Taken:**

Be advised that PI Supt. instructed detainees that they could hang wet clothing on their bunk or the shower wall. No clothing can be hung on vents in the dayroom or clotheslines that block the electric view in the cell. Detainees are permitted to hang hygiene products to shower in their cells.

Supt. C. Plaxico #11 Dept. C. Allen Date: 10/20/06 Div/Dept. X

(Print- name of individual responding)

(Signature of individual responding)



**C.C.D.O.C. DETAINEE GRIEVANCE PROCESSED AS A REQUEST**

\* Please note: When processed as a request, PART - B is not applicable. \*

Detainee's Last Name: Miller First Name: Robert

ID#: 2011-91333 Div: 10 Tier/Living Unit: 202

Date of Request: 5/22/06 Date C.R.W. Received Request: 1/1/

This Request has been processed by: 115 [Signature] C.R.W.

**Summary of Request:**

Detainee is requesting a transfer to the [unclear] facility.  
He is currently housed in the [unclear] facility.

**Response and/or Action Taken:**

This is a C.C.D.O.C. County issue not  
within the purview of the [unclear] office.  
The request is being referred to the [unclear] office for  
review and response.

[Signature] Date: 6/12/06 Div./Dept. San Diego  
(Print name of individual responding) (Signature of individual responding)

C.C.D.O.C. DETAINEE GRIEVANCE PROCESSED AS A REQUEST
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\* Please note: When processed as a request, PART - B is not applicable. \*

Detainee's Last Name: WALKER First Name: ROBERT

ID#: 2159933 Div: 10 Tier/Living Unit: 112

Date of Request: 05/17/06 Date C.R.W. Received Request: 05/24/06

This Request has been processed by: Det. Deary C.R.W.

**Summary of Request:**

Detainee Robert Walker is requesting that his tier be changed to 112.  
He is currently in tier 110.

**Response and/or Action Taken:**

During searches, officers are instructed to place any and all items on  
detainee's bunk and go through said items. Clothes lines are not allowed  
in cells and are to be removed by officers, however any clothes are also  
to be placed on detainee's bunk. A Sgt is assigned to oversee all tier  
searches to assure compliance of the search procedure.

CAPT. ANCE  
 (Print- name of individual responding)

Capt. Ance  
 (Signature of individual responding)

Date: 6/1/06 Div./Dept. 10

Superintendent

Dear Superintendent

I am appealing my disciplinary charge 110 Verbally or physically demonstrating distress to a staff member. 202 Being in a unbecoming area. 203 Perilous to another person. I was found guilty on 4-28-06 for something I did not do I was lied on by one of your staff members an officer Carter #1169. I tried to explain to Sgt. Collins, Sgt. Helms and Capt. Seab #10 on the second shift and Chief Moresi #76 but no one cared to look into my situation or investigate my charges. on 4-25-06 I was the last one in line to see the nurse I was also called to the enter lock by counselor gray. there was one guy in front of me, I said I want to see the washroom when I got finish the guy in front of me was finish seeing the nurse Jefferson and left out when I got to the enter lock I had just caught nurse Jefferson as she was leaving out the other door. I open the inner door to ask her about my medication and that's when officer Carter #1169 just snapped on me telling me to get out of "his" enter lock I told him that I want to see the nurse and how was he just going to deny me of seeing the nurse at that time nurse Jefferson asked me what I wanted I explain to her about my medication and she said she would take care of it. all the time this was going on counselor gray was standing there and another nurse ~~was~~ I guess

nurse jefferson was training her. as nurse jefferson backed  
 out to leave I turned around and officer carter said that  
 I was going to get a ticket I ask him for what that  
 I haven't done anything, then officer carter stated well  
 you will read about it, that was all I said between  
 officer carter and me. counselor gray then started talking  
 to me about a grievance I wrote about my diet camp.  
 He gave me my reply and after that I left. I was  
 thinking to myself why officer carter snapped on me  
 like that, until another inmate told me that john taylor  
 another inmate and officer carter's friend and a worker was  
 out in the outer lock with carter earlier talking about  
 me john taylor told officer carter that I was the one  
 talking about him and calling him names when we was  
 a lock-down that morning 4-24-06. I guess that's why  
 officer carter had a problem with me officer carter  
 never acted this way with me until that day nor  
 have I ever been disrespectful to officer carter or any  
 other staff member since I've been here. I've been by all  
 rules and regulations you can ask any officer that  
 I've come in contact with since I've been here and  
 that's just about all of them. after I found out what  
 john taylor said I told officer carter that when I confronted  
 him I told him to keep my name out of  
 his mouth I went back to playing cards while  
 john went back into the outer lock to talk to officer  
 carter, at lunch I went into my cell and  
 went to sleep I did not come back I don't even

come out of my cell in the morning and officer  
 Carter knows that the only reason I came out of my  
 cell that day was to see the nurse. Sgt. Collins came  
 to see me he never said anything to me about verbally  
 disrespecting officer Carter all he ask me about is that  
 did I have a problem with John Taylor I said no  
 and Collins said o.k. if he and Carter went home was  
 he going to have a problem out of me and John I told  
 Collins that I did not have a problem with John  
 ask long as he did not ~~have~~ have a problem with me.  
 Sgt. Collins said o.k. and left. I went back to sleep  
 and left it at that. When shift changed Carter when  
 down stairs since Collins did find any reason to  
 walk ~~I~~ me to the hall and talk to the chief and  
 Sgt. Helms and Capt. Scipio. at around 10 o'clock p.m.  
 that night I was told by officer Martin to pack my  
 stuff that I was going to the holding cage I asked  
 him for what and he said he did not know. I went  
 down stairs thinking that I was going to the hall but  
 officer Anderson told me that I was going to 3D I  
 ask her why I had to go to 3D because I haven't  
 done anything. I started to go to the hall that night  
 but I said I would wait and talk to Collins in the  
 morning. When Sgt. Collins came up on 3D he saw me  
 and said so they move anyway I ask him why I  
 was moved he said he did not know why I was moved  
 but he would check it out I asked him can he move  
 me back and he said that the only one that can move

Please Print Information

<b>SECTION I DISCIPLINE REPORT</b>		Division: <u>10</u>	Date of Infraction: <u>4/12/06</u>
Detainee's Name: <u>BLANK, Robert</u>		ID# <u>200400633</u>	Date of Birth: <u>1/12/1962</u>
Detainee's Living Unit: <u>2D</u>	Place of Incident: <u>SAFETY CAGE</u>	Time: <u>09:30 AM HRS</u>	
<input checked="" type="checkbox"/> Category I	<input type="checkbox"/> Category II	<input type="checkbox"/> Category III	<input type="checkbox"/> Category IV
Description of Charge(s) & Code(s): <u>110 VERBALLY &amp; PHYSICALLY DEMONSTRATING DISRESPECT TO A STAFF MEMBER, SEE BEING IN UNAUTHORIZED AREA &amp; VERBAL THREAT TO ANOTHER PERSON.</u>			
Detainee Injuries: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Attention: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name(s): <u>N/A</u>	
Staff Injuries: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Attention: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name(s): <u>N/A</u>	
Victim Report: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Reported to Internal Investigations: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Material Confiscated / Evidence Bag # (attach photocopy of evidence): <u>NONE</u>			
Description of Incident: <u>INMATE ROBERT BLANK WAS ADMITTED BY R/C CARTER NOT TO COME INTO THE INTERLOCK BECAUSE THERE WAS ALREADY ONE INMATE SEEING THE NURSE. HOWEVER, HE PUSHED BY R/C CARTER AND SAID FUCK YOU I NEED TO SEE THE NURSE. AND BECAME VERBALLY ABUSIVE TO INMATE JOHN TAYLOR FOR NO REASON. HIS IT WAS FUCK AND R/C CARTER. SO R/C REPORTED THIS SITUATION.</u>			
Disciplinary Report Delivered to Detainee By (Name and Star #): <u>CHIEF S. MORECI #76</u>		Date and Time Delivered: <u>4/12/06 12:05 HRS</u>	
Detainee's Signature: <u>[Signature]</u>			

Reporting Employee's Signature: <u>[Signature]</u>		Personnel Who Witnessed Infraction: <u>[Signature]</u>
Reviewing Supervisor's Signature & Star #: <u>[Signature] #76</u>	Name and Star (printed): <u>CHIEF S. MORECI #76</u>	
Supervisor of Detainee's Signature: <u>[Signature] #76</u>	Name and Star (printed): <u>CHIEF S. MORECI #76</u>	

<b>SECTION II DISPOSITION BY DISCIPLINARY HEARING BOARD</b>		Date of Hearing: <u>4/29/06</u>
Detainee Requested Witnesses <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Waive 24 Hr. Notice <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Representative/Interpreter <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Detainee Witness: <u>[Signature]</u>	Living Unit: <u>[Signature]</u>	Detainee Witness: <u>[Signature]</u>
Detainee's Plea to Charge <input type="checkbox"/> Guilty As Charged <input checked="" type="checkbox"/> Not Guilty	Detainee Status While Awaiting Hearing: <u>SE5</u>	
Detainee's Statement Regarding Infraction: (Use Continuation Sheet If Necessary) <u>Heard inmate Carter that he did not push his way to the interlock, nor did he threaten anyone.</u>		
Testimony of Witnesses: (Use Continuation Sheet If Necessary) <u>[Signature]</u>		

IT IS THE FINDING OF THE DISCIPLINARY HEARING BOARD THAT: ("X" APPLICABLE BOX)			
<input checked="" type="checkbox"/> GUILTY AS CHARGED	<input type="checkbox"/> NOT GUILTY	<input type="checkbox"/> INVALID REPORT	<input type="checkbox"/> 72 HOURS EXPIRED
Disciplinary Hearing Board's Finding is Based On The Following Information:			
<input checked="" type="checkbox"/> DETAINEE REPLY/DISCIPLINARY REPORT <input type="checkbox"/> OTHER			
Disciplinary Hearing Board Recommends The Following Action:			
Start Date of Action: <u>4/29/06</u>	End Date: <u>4/29/06</u>		
Disciplinary Hearing Board Member Signature/Title/Date: <u>[Signature] 4/29/06</u>	Disciplinary Hearing Board Member Signature/Title/Date: <u>[Signature] 4/29/06</u>	Disciplinary Hearing Board Member Signature/Title/Date: <u>[Signature] 4/29/06</u>	

If found guilty of disciplinary charges, you may appeal to the divisional Superintendent.  
The Superintendent will render a decision in writing within five (5) working days of receiving the appeal.  
White - Disciplinary Hearing Board's Copy  
Pink - Detainee's Copy After Hearing  
Yellow - Superintendent/Divisional File Copy  
Gold/gray - Detainee's Copy Prior to Hearing (not portion of Charge(s))



Please Print Information

04POFAB1115

<b>SECTION I DISCIPLINE REPORT</b>		Division: <u>10</u>	Date of Infraction: <u>26 APR 2006</u>
Detainee's Name: <u>CLARK ROBERT G</u>		ID# <u>2004000933</u>	Date of Birth: <u>11/21/1962</u>
Detainee's Living Unit: <u>3D</u>		Place of Incident: <u>3D PAT ROOM</u>	Time: <u>3:30 PM</u> HRS
<input type="checkbox"/> Category I	<input checked="" type="checkbox"/> Category II	<input type="checkbox"/> Category III	<input type="checkbox"/> Category IV
<input type="checkbox"/> Category V <input type="checkbox"/> Category VI			
Description of Charge(s) & Code(s): <u>305. DISOBEYING VERBAL ORDER FROM SUPERVISOR</u> <u>OFF 2-2 BEING IN UNAUTHORIZED AREA</u>			
Detainee Injuries: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Medical Attention: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Name(s):			
Staff Injuries: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Medical Attention: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Name(s):			
Victim Report: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Reported to Internal Investigations: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Material Confiscated / Evidence Bag # (attach photocopy of evidence): <u>NONE</u>			
Description of Incident: <u>344125 HE HUNGERS CLARK ROBERT G. REPORTED IN</u> <u>305 IN CO. CIRCULATION. XT. HE C/M'S NOTIFIED</u> <u>DETENEE CLARK WAS TRANSFERRED TO TIER 1A</u> <u>PENDING FLOORING GUARD FINDINGS.</u>			
Disciplinary Report Delivered to Detainee By (Name and Star #):			
Date and Time Delivered: <u>11:40</u> HRS			
Detainee's Signature:			

Reporting Employee / Signature & Star # <u>Chen Kelly #3109</u>	CCDOC Personnel Who Witnessed Infraction: <u>Off Rodriguez #5236</u>
Reviewing Supervisor / Signature & Star # <u>LT D. MORTINEZ #97</u>	Name and Star (printed): <u>LT D. MORTINEZ #97</u>
Supervisor or detainee's Signature: <u>CLARK ROBERT G</u>	Name and Star (printed): <u>CLARK ROBERT G #10</u>

<b>SECTION II DISPOSITION BY DISCIPLINARY HEARING BOARD</b>		Date of Hearing: <u>7/20/06</u>
Detainee Requested Witnesses <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Waive 24 Hr. Notice <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Representative/Interpreter <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Detainee Witness:	Living Unit:	Detainee Witness: Living Unit:
Detainee's Plea to Charge: <input checked="" type="checkbox"/> Guilty As Charged <input type="checkbox"/> Not Guilty		Detainee Status While Awaiting Hearing: <u>ST</u>
Detainee's Statement Regarding Infraction: (Use Continuation Sheet If Necessary) <u>He is innocent. He did not hear him and</u> <u>report to go to the punishment</u>		
DETENEE SIGNATURE: <u>CLARK ROBERT G</u>		
Testimony of Witnesses: (Use Continuation Sheet If Necessary)		
IT IS THE FINDING OF THE DISCIPLINARY HEARING BOARD THAT: ("X" APPLICABLE BOX)		
<input checked="" type="checkbox"/> GUILTY AS CHARGED <input type="checkbox"/> NOT GUILTY <input type="checkbox"/> INVALID REPORT <input type="checkbox"/> 72 HOURS EXPIRED <input type="checkbox"/> 7 DAY EXPIRED		
Disciplinary Hearing Board's Finding is Based On The Following Information:		
<input checked="" type="checkbox"/> DETENEE REPLY/DISCIPLINARY REPORT <input type="checkbox"/> OTHER <u>2-5 = 10 Day</u>		
Disciplinary Hearing Board Recommends The Following Action:		
Start Date of Action: <u>4/29/06</u> End Date: <u>5/9/06</u>		
Disciplinary Hearing Board Member Signature/Title/Date: <u>[Signature] 4/28/06</u>	Disciplinary Hearing Board Member Signature/Title/Date: <u>[Signature] 4/28-06</u>	Disciplinary Hearing Board Member Signature/Title/Date: <u>[Signature] 04/28/06</u>

If found guilty of disciplinary charges, you may appeal to the divisional Superintendent.  
The Superintendent will render a decision in writing within five (5) working days of receiving the appeal.

White - Disciplinary Hearing Board's Copy  
Pink - Detainee's Copy After Hearing  
Yellow - Superintendent/Divisional File Copy  
Goldsear - Detainee's Copy Prior to Hearing (notification of Charge(s))

# Cook County Department Of Corrections Notice of Mail Return

Detainee's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Detainee Identification Number: \_\_\_\_\_

Mail Returned To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Cook County Department of Corrections will not accept the following item(s) from detainees, family members, detainee visitors or any other outside source.

- |  |  |
|--|--|
| <input type="checkbox"/> Underwear   | <input type="checkbox"/> Socks   |
| <input type="checkbox"/> Gym Shoes   | <input type="checkbox"/> Stamped Envelopes                             |
| <input type="checkbox"/> Jewelry   | <input type="checkbox"/> Towels  |
| <input type="checkbox"/> Clothing  | <input type="checkbox"/> Cosmetics                                     |
| <input type="checkbox"/> Aerosol Cans  | <input type="checkbox"/> Postage Stamps                                |
| <input type="checkbox"/> Bar Soap  | <input type="checkbox"/> Envelopes                                     |
| <input type="checkbox"/> Candy   | <input type="checkbox"/> Food  |
| <input type="checkbox"/> Posters   | <input type="checkbox"/> Leather Cover Books                           |
| <input type="checkbox"/> Adhesive  | <input type="checkbox"/> Nail File or Clippers                         |
| <input type="checkbox"/> Weapons   | <input type="checkbox"/> Pictures showing weapons, money or gang signs |
| <input type="checkbox"/> Batteries   | <input type="checkbox"/> Marking Pens                                  |
| <input type="checkbox"/> Credit cards  | <input type="checkbox"/> Identification Cards                          |
| <input type="checkbox"/> Paint brushes or Solvents   | <input type="checkbox"/> Pencils, pens or sharpeners                   |
| <input type="checkbox"/> Cigarettes or cigars  | <input type="checkbox"/> Cigarette lighter or matches                  |
| <input type="checkbox"/> Playing Cards or Puzzles  | <input type="checkbox"/> Radios, tape player or television sets        |
| <input type="checkbox"/> Stickers, decals or patches   | <input type="checkbox"/> Foreign or illegal Substances                 |
| <input type="checkbox"/> Dental floss, paste, or powder  | <input type="checkbox"/> Medicine or medical supplies                  |
| <input type="checkbox"/> Personal checks or cash   |  |
| <input type="checkbox"/> Money Orders in excess of \$100.00 will not be accepted   |  |
| <input type="checkbox"/> Money Orders that are not properly filled in or have been altered will not be accepted  |  |
| <input type="checkbox"/> Plastic sentiment, musical cards or very large cards  |  |
| <input type="checkbox"/> Polaroid instant pictures with double backing   |  |
| <input type="checkbox"/> Hairbrushes, combs or picks   |  |
| <input type="checkbox"/> Rollers, boobie pins, clips or plastic bags   |  |
| <input type="checkbox"/> Glass, wood or metal objects  |  |
| <input type="checkbox"/> Twine, wire or any other binding material   |  |
| <input type="checkbox"/> Paperback books, magazines, newspapers limit of three (3) per mailing   |  |
| <input type="checkbox"/> Correspondences from inmates from other correctional institutes without prior approval from both institutions   |  |
| <input type="checkbox"/> any magazines or pictures showing drugs, weapons, nudity both male and female, or contain sexually explicit materials or actions. These types of items will be returned to you. |  |
| <input type="checkbox"/> Other: _____  |  |



2

RESIDENT'S NAME \_\_\_\_\_  
 ID NUMBER \_\_\_\_\_ DATE \_\_\_\_\_  
 MAIL RETURNED TO \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

WE ARE RETURNING THE ENCLOSED MAIL FOR THE FOLLOWING REASON.  
 "NOT PERMITTED PER INSTITUTIONAL REGULATIONS" SEE ITEM CHECK BELOW:

<p>ADHESIVE TAPE                  AEROSOL CANS                  BAR SOAP                  BATTERIES                  CANDY                  CIGARETTES OR CIGAR                  CIGARETTE LIGHTER OR MATCHES                  COSMETICS                  CREDIT CARDS                  DENTAL FLOSS, PASTE OR POWDER                  FOOD                  FOREIGN OR ILLEGAL SUBSTANCE ENCLOSED                  GLASS, WOOD OR METAL OBJECTS                  GLUE                  HAIR BRUSH, COMB OR PICK                  IDENTIFICATION CARDS                  JEWELRY                  KEYS                  MAPS                  MARKING PEN                  MEDICINE OR MEDICAL SUPPLIES                  NAIL FILE OR CLIPPERS                  PAINT, BRUSHES OR SOLVENT                  PENCILS, PEN OR SHRPENER                  PICTURES SHOWING WEAPON, MONEY OR GANG SIGN                  PLAYING CARDS OR PUZZLES                  PLASTIC SENTIMENT, MUSICAL CARDS OR VERY LARGE CARDS                  POLOROID INSTANT PICTURES WITH DOUBLE BACKING                  POSTERS                  RADIOS, TAPE PLAYER OR TELEVISION SETS                  STICKERS, DECALS OR PATCHES                  ROLLERS, BOBBIE PINS, CLIPS OR PLASTIC CAPS                  TWINE, WIRE OR OTHER BINDING MATERIALS                  INMATE ARE NOT PERMITTED TO CORRESPOND WITH OTHER INMATES OF OTHER                  CORRECTIONAL INSTITUTIONS WITHOUT THE PRIOR APPROVAL FROM BOTH WARDENS                  PERSONAL CHECK OR CASH                  MONEY ORDER IN EXCESS OF \$100.00 WILL NOT BE ACCEPTED                  MONEY ORDER NOT PROPERLY FILLED IN OR ALTER MONEY ORDER WILL NOT BE                  ACCEPTED                  CLOTHING FOR JURY TRIAL ONLY. MUST BE POSTMARKED MORE THE 50 MILES                  OUTSIDE OF COOK COUNTY.                  PAPERBACK BOOK, MAGAZINES, _____ LIMIT OF 3 PER MAILING                  OTHER _____</p>	<table border="1"> <tr> <td>PLAYboy</td> <td>PLAYGIRL</td> </tr> <tr> <td>MAXIM</td> <td>Stun</td> </tr> <tr> <td>FEDS</td> <td>MAD</td> </tr> <tr> <td>F H M</td> <td>MURDER DO</td> </tr> <tr> <td>Don Dina</td> <td>Black Man</td> </tr> <tr> <td>Swinsuit</td> <td>Smooth</td> </tr> <tr> <td>Blacktail</td> <td>Black Bu.</td> </tr> <tr> <td>Complex</td> <td>High Rider</td> </tr> <tr> <td>Black Gold</td> <td>STUFF</td> </tr> <tr> <td>Penthouse</td> <td>Blender</td> </tr> <tr> <td>H.</td> <td>Loft</td> </tr> <tr> <td>CURVES</td> <td>SOURCE</td> </tr> <tr> <td>VIBE</td> <td>XXL</td> </tr> <tr> <td>LYRIC</td> <td>KING</td> </tr> </table>	PLAYboy	PLAYGIRL	MAXIM	Stun	FEDS	MAD	F H M	MURDER DO	Don Dina	Black Man	Swinsuit	Smooth	Blacktail	Black Bu.	Complex	High Rider	Black Gold	STUFF	Penthouse	Blender	H.	Loft	CURVES	SOURCE	VIBE	XXL	LYRIC	KING
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MR-1004

~~ALL THESE ITEMS ARE~~  
~~RETURNED TO THE SENDER~~

# **Cook County Department of Corrections** **Notice of Mail Return**

Detainee's Name: Robert Clark Date: 2.07

Detainee Identification Number: 2004.0076333 10.20

Mail Returned To: Mildred Burt

429 W. 119 St. Chgo. IL 60620

The Cook County Department of Corrections will not accept the following item(s) from detainee family members, detainee visitors or any other outside source.

- |  |  |
|--|--|
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| <input type="checkbox"/> Paint Brushes or Solvents   | <input type="checkbox"/> Pencils, pens or sharpeners                   |
| <input type="checkbox"/> Cigarettes or Cigars  | <input type="checkbox"/> Cigarette lighter or matches                  |
| <input type="checkbox"/> Playing Cards or Puzzles  | <input type="checkbox"/> Radios, Tape player or Television sets        |
| <input type="checkbox"/> Stickers, Decal's or Patches  | <input type="checkbox"/> Foreign or Illegal Substances                 |
| <input type="checkbox"/> Dental floss, paste, or power   | <input type="checkbox"/> Medicine or Medical Supplies                  |
| <input type="checkbox"/> Personal checks or cash   |  |
| <input type="checkbox"/> Money Orders in excess of \$100.00 will not be accepted   |  |
| <input type="checkbox"/> Money Orders that are not properly filled in or have been altered will not be accepted                        |  |
| <input type="checkbox"/> Plastic sentiment cards, musical cards or very large cards  |  |
| <input type="checkbox"/> Polaroid instant pictures with double backing   |  |
| <input type="checkbox"/> Hairbrush, combs or picks   |  |
| <input type="checkbox"/> Rollers, bobbie pins, clips or plastic bags   |  |
| <input type="checkbox"/> Twine, wire or any other binding material   |  |
| <input type="checkbox"/> Paperback books, magazines, newspapers limit of three (3) per mailing   |  |
| <input type="checkbox"/> Correspondences from inmates from other correctional institutes without prior approval from both institutions |  |

Any magazines or pictures showing drugs, weapons, nudity both male and female, or contain sexually explicit materials or actions. These types of items will be returned to you.

Other

Playboy	H	Blender	Swim Suit	Panorama M.A.
Play Girl	Murder Dog	XXL	Black Tail	Slam
Maxim	Luric	Don Dina	Black Gold	Fox
Stun	King	Curves	Smooth	Cheri
FEDS	Source	LOFT	High Rider	Sex Life
E.H.M.	Complex	VIBE	Blackman	Vixen
MAD	STUFF	Pent House	Men's Health	As Is

CHERRY  
DRINK MIX  
63046A



NOT FOR INDIVIDUAL SALE  
**Non-Dairy Creamer**  
INGREDIENTS: CORN SYRUP SOLIDS,  
PARTIALLY HYDROGENATED SOYBEAN  
OIL, SODIUM CASEINATE (A MILK  
DERIVATIVE), DI-POTASSIUM  
PHOSPHATE, SODIUM  
SILICOALUMINATE, ARTIFICIAL COLOR,  
MONO-AND DIGLYCERIDES, SOY  
LECITHIN, ARTIFICIAL FLAVOR. ©D

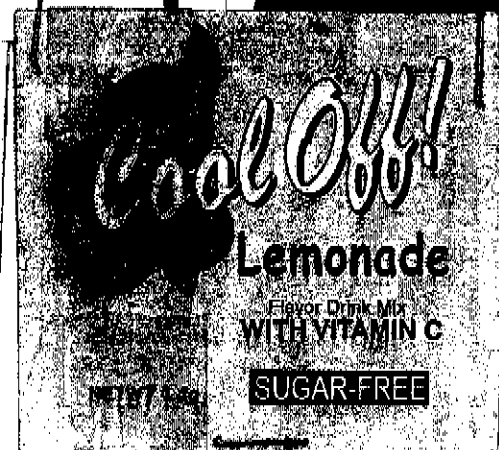
Distributed by  
**VISTAR<sub>LLC</sub> Corporation**  
Centennial, CO 80112

CAUTION: LIKE ALL POWDERED  
PRODUCTS THIS PRODUCT SHOULD  
NOT BE STORED OR USED NEAR AN  
OPEN FLAME OR HIGH HEAT SOURCE.



**Sugar**  
Net Wt 0.1 oz (3g)  
Distributed by VISTAR<sub>LLC</sub> Corporation  
Centennial, CO 80112

COFFEE CREAMER  
SUGAR





COOK COUNTY

SPENDING LIMIT \$100.00 PER WEEK

INMATE NUMBER									
0	0	0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MI \_\_\_\_\_

UNIT \_\_\_\_\_

I Authorize The Sheriff To Charge My Account:

(ORDER MUST BE SIGNED)

Prices are subject to change without notice. Substitutions will not be made.  
Orders will be adjusted if there is not enough money available in account.

Fill in quantity column only.  
Prices include tax

**MARKING INSTRUCTIONS**

- Make dark marks that fill the oval completely.
- Make no stray marks.

WRONG ○ × ○ × ○ RIGHT ●

**HEALTH & BEAUTY PRICE**

● 2 3 4 5 10 15 20

1 2	1001 Conditioner - Balsam 14 oz	\$1.46
1 2	1002 Conditioner - Balsam 4 oz	\$0.80
1 2	1003 Shampoo - Balsam 14 oz	\$1.46
1 2	1004 Shampoo - Balsam 4 oz	\$0.80
1 2	1005 Shampoo VO5	\$2.20
1 2	1006 Shampoo - Dandruff 11 oz	\$2.02
1 2	1009 Hair Relaxer/Perm	\$7.26
1 2	1010 Hair Food	\$2.05
1 2	1011 Coconut Oil Conditioner	\$2.55
1 2	1012 Pomade	\$2.45
1 2	1014 Deodorant - Generic Men's	\$1.85
1 2	1015 Deodorant - Generic Ladies	\$1.85
1 2	1016 Deodorant - Ladies (Mennen)	\$2.45
1 2	1017 Deodorant - Men's (Mennen)	\$2.45
1 2	1018 Deodorant - Roll On 1.5 oz	\$0.80
1 2	1019 Baby Powder	\$1.70
1 2	1020 Lotion - Cocoa Butter	\$1.85
1 2	1022 Lotion - Hand / Body	\$1.85
1 2	1023 Medicated Skin Cream	\$1.95
1 2	1024 Anti-Fungal Cream	\$2.25
1 2	1025 Lip Balm Conditioner	\$0.97
1 2	1026 Magic Cream Shave Depilatory	\$3.00
1 2	1027 After Shave 4 oz	\$1.50
1 2	1028 Soap - Irish Spring	\$0.90
1 2	1030 Soap - Tone	\$1.00
1 2	1031 Soap - Jergens	\$0.90
1 2	1032 Soap - Like Dial	\$0.90
1 2	1033 Soap Dish	\$0.60
1 2	1034 Mouthwash - Mint	\$1.50
1 2	1065 Toothpaste - Freshmint 4.6oz	\$1.50
1 2	1036 Toothpaste - Colgate 2.7oz	\$1.87
1 2	1037 Toothbrush - medium	\$0.97
1 2	1038 Effident Denture Cleanser 40 Ct	\$2.75
1 2	1039 Effergrip 2.5 oz	\$3.75
1 2 3 4 5	1040 Acetaminophen 2 pk	\$0.45
1 2 3 4 5	1041 Ibuprofen 2pk	\$0.45
1 2 3 4 5	1042 Roloids (Original)	\$0.80
1 2 3 4 5	1043 Halls Cough Drops	\$0.97
1 2	1044 Daily Vitamin with Iron	\$2.95
1 2	1045 Saline Solution	\$2.15
1 2	1046 Douche - Sweet n Fresh	\$1.50
1 2	1047 Super Maxi Pad	\$1.53
1 2	1048 Foot Powder	\$1.75
1 2	1049 Comb 9" - Dress	\$0.40
1 2	1050 Palm Brush	\$0.45
1 2	1051 Shower Cap	\$0.27
1 2 3 4 5 10 15 20	1068 Metamucil 2 pk Sugar Free	\$1.25
1 2 3 4 5 10 15 20	1069 Vaseline 5gm packet	\$0.17
1 2 3 4 5 10 15 20	1070 Hydrocortisone Ointment	\$3.00
1 2 3 4 5 10 15 20	1060 Reading Glasses +1.0	\$6.00
1 2 3 4 5 10 15 20	1061 Reading Glasses +1.25	\$6.00
1 2 3 4 5 10 15 20	1053 Reading Glasses +1.5	\$6.00
1 2 3 4 5 10 15 20	1054 Reading Glasses +1.75	\$6.00
1 2 3 4 5 10 15 20	1055 Reading Glasses +2.00	\$6.00
1 2 3 4 5 10 15 20	1056 Reading Glasses +2.25	\$6.00
1 2 3 4 5 10 15 20	1057 Reading Glasses +2.50	\$6.00
1 2 3 4 5 10 15 20	1058 Reading Glasses +2.75	\$6.00
1 2 3 4 5 10 15 20	1059 Reading Glasses +3.00	\$6.00
1 2 3 4 5 10 15 20	1062 Reading Glasses +3.25	\$6.00
1 2 3 4 5 10 15 20	1063 Reading Glasses +3.5	\$6.00

**HEALTH & BEAUTY PRICE**

1 2 3 4 5 10 15 20

1 2 3 4 5 10 15 20	3050 Chips - Regular - 1.5 oz	\$0.78
1 2 3 4 5 10 15 20	3051 Chips - BBQ (spicy) - 1.5 oz	\$0.78
1 2 3 4 5 10 15 20	3055 Corn Chips - Chili Cheese - 2 oz	\$0.78
1 2 3 4 5 10 15 20	3056 Doritos - Nacho - 1.75 oz	\$0.78
1 2 3 4 5 10 15 20	3058 Cheese Popcorn - 1 oz	\$0.78
1 2 3 4 5 10 15 20	3059 Cheetos - Crunchy - 2 oz	\$0.78
1 2 3 4 5 10 15 20	3060 Cheetos - Hot - 2 oz	\$0.78
1 2 3 4 5 10 15 20	3063 Baconettes - 1 oz	\$0.78
1 2 3 4 5 10 15 20	3064 Flamin' Hot Trail Mix - 2 oz	\$0.78
1 2 3 4 5 10 15 20	3023 Doritos - Flery Habanero	\$0.78
1 2 3 4 5 10 15 20	3016 Peanuts - Salted - 1 oz	\$0.45
1 2 3 4 5 10 15 20	3017 Saltines - 16 oz	\$1.90
1 2 3 4 5 10 15 20	3019 Snack Crackers - 2 oz	\$2.30
1 2 3 4 5 10 15 20	3021 Sunflower Kernels	\$0.60

**CHIPS**

1 2 3 4 5 10 15 20	3050 Chips - Regular - 1.5 oz	\$0.78
1 2 3 4 5 10 15 20	3051 Chips - BBQ (spicy) - 1.5 oz	\$0.78
1 2 3 4 5 10 15 20	3055 Corn Chips - Chili Cheese - 2 oz	\$0.78
1 2 3 4 5 10 15 20	3056 Doritos - Nacho - 1.75 oz	\$0.78
1 2 3 4 5 10 15 20	3058 Cheese Popcorn - 1 oz	\$0.78
1 2 3 4 5 10 15 20	3059 Cheetos - Crunchy - 2 oz	\$0.78
1 2 3 4 5 10 15 20	3060 Cheetos - Hot - 2 oz	\$0.78
1 2 3 4 5 10 15 20	3063 Baconettes - 1 oz	\$0.78
1 2 3 4 5 10 15 20	3064 Flamin' Hot Trail Mix - 2 oz	\$0.78
1 2 3 4 5 10 15 20	3023 Doritos - Flery Habanero	\$0.78
1 2 3 4 5 10 15 20	3016 Peanuts - Salted - 1 oz	\$0.45
1 2 3 4 5 10 15 20	3017 Saltines - 16 oz	\$1.90
1 2 3 4 5 10 15 20	3019 Snack Crackers - 2 oz	\$2.30
1 2 3 4 5 10 15 20	3021 Sunflower Kernels	\$0.60

**DRINKS**

1 2 3 4 5 10 15 20	5001 Coffee - Decaf - 10 pk	\$2.75
1 2 3 4 5 10 15 20	5002 Coffee - Regular - 10 pk	\$2.50
1 2 3 4 5 10 15 20	5003 Sugar - 10 pk	\$0.40
1 2 3 4 5 10 15 20	5004 Creamer - 10 pk	\$0.40
1 2 3 4 5 10 15 20	5005 Sugar Substitute - 10 pk	\$0.17
1 2 3 4 5 10 15 20	5007 Lemon Drink - Sugar Free 10 pk	\$2.20
1 2 3 4 5 10 15 20	5008 BL Cherry Drink - Sugar Free 10 pk	\$2.20
1 2 3 4 5 10 15 20	5010 Orange Breakfast Drink 6oz packet	\$1.40
1 2 3 4 5 10 15 20	5011 Lemonade 6oz packet	\$1.40
1 2 3 4 5 10 15 20	5012 Fruit Punch 6oz packet	\$1.40
1 2 3 4 5 10 15 20	5013 Cherry Drink 6oz packet	\$1.40
1 2 3 4 5 10 15 20	5015 Hot Chocolate - 10Ct box	\$2.30
1 2 3 4 5 10 15 20	5019 Tea - 100 ct	\$2.50

**GENERAL MERCHANDISE**

1 2 3 4 5 10 15 20	6001 Envelopes #10 White	\$0.03
1 2 3 4 5 10 15 20	6002 Legal Pad - White	\$0.75
1 2 3 4 5 10 15 20	6003 Writing Pen	\$0.28
1 2 3 4 5 10 15 20	6004 Greeting Card - Birthday	\$1.00
1 2 3 4 5 10 15 20	6005 Greeting Card - Juvenile BDay	\$1.00
1 2 3 4 5 10 15 20	6006 Greeting Card - Get Well	\$1.00
1 2 3 4 5 10 15 20	6007 Greeting Card - Friendship	\$1.00
1 2 3 4 5 10 15 20	6008 Greeting Card - Anniversary	\$1.00
1 2 3 4 5 10 15 20	6009 Greeting Card - Thank You	\$1.00
1 2 3 4 5 10 15 20	6010 Greeting Card - Holiday	\$1.00
1 2 3 4 5 10 15 20	6011 Greeting Card - Birthday (Spanish)	\$1.00
1 2 3 4 5 10 15 20	6016 Greeting Card - Love	\$1.00
1 2 3 4 5 10 15 20	6013 Tumbler - Plastic w/Lid	\$0.50
1 2 3 4 5 10 15 20	6014 Envelopes - 9 X 12	\$0.15
1 2 3 4 5 10 15 20	6015 Laundry Detergent	\$0.60
1 2 3 4 5 10 15 20	6012 Playing Cards	\$1.30

**PASTRIES PRICE**

1	2	3	4	5	10	15	20	7002 Cinnamon Roll - Texas - 4.25 oz	\$0.85
1	2	3	4	5	10	15	20	7003 Peanut Butter Bars - Box - 12 oz	\$1.65
1	2	3	4	5	10	15	20	7004 Oatmeal Sandwich Cakes - Box - 8.25 oz	\$1.65
1	2	3	4	5	10	15	20	7005 Dunking Sticks - Box - 10 oz	\$1.65
1	2	3	4	5	10	15	20	7006 Swiss Rolls - Box - 12 oz	\$1.75
1	2	3	4	5	10	15	20	7008 Cupcake - 4 oz	\$1.00
1	2	3	4	5	10	15	20	7009 Honey Buns - 6 oz	\$1.00

**FOOD**

1	2	3	4	5	10	15	20	7102 Jalapeno Cheese Spread - 8 oz	\$2.00
1	2	3	4	5	10	15	20	7105 Sliced Jalapeno Peppers - .7 oz	\$0.45
1	2	3	4	5	10	15	20	7106 Hot Sauce - 6 oz	\$1.25
1	2	3	4	5	10	15	20	7107 BBQ Sauce - 18 oz	\$2.40
1	2	3	4	5	10	15	20	7108 Squeeze Ketchup - 24 oz	\$1.50
1	2	3	4	5	10	15	20	7109 Mayonnaise - 11.5 oz	\$2.20
1	2	3	4	5	10	15	20	7110 6 Gun Beef Stick - 1.125 oz	\$0.60
1	2	3	4	5	10	15	20	7112 Sliced Pepperoni - 3 oz	\$2.25
1	2	3	4	5	10	15	20	7113 Summer Sausage - Beef - 5 oz	\$2.25
1	2	3	4	5	10	15	20	7114 Summer Sausage - Hot Beef - 5 oz	\$2.25
1	2	3	4	5	10	15	20	7115 Tuna - 3 oz	\$1.50
1	2	3	4	5	10	15	20	7116 Dill Pickle - 1 oz	\$1.00
1	2	3	4	5	10	15	20	7117 Tortillas - 6 pk	\$0.95
1	2	3	4	5	10	15	20	7118 Peanut Butter - Single - 1.12 oz	\$0.43
1	2	3	4	5	10	15	20	7120 Strawberry Jelly - 12 oz	\$2.20
1	2	3	4	5	10	15	20	7121 Grape Jelly - 12 oz	\$2.20
1	2	3	4	5	10	15	20	7122 Honey - 8 oz	\$1.95
1	2	3	4	5	10	15	20	7123 Granola Bar - Ch Chip - 1.3 oz	\$0.40
1	2	3	4	5	10	15	20	7124 Strawberry Cereal Bar 1.3 oz	\$0.50
1	2	3	4	5	10	15	20	7131 Sardines - 3.53 oz	\$1.74
1	2	3	4	5	10	15	20	7137 Salsa Medium - 4 oz	\$0.97
1	2	3	4	5	10	15	20	7135 Refried Beans - 4 oz	\$1.99
1	2	3	4	5	10	15	20	7136 Spicy Refried Beans/Precooked Rice - 4.4 oz	\$2.15
1	2	3	4	5	10	15	20	7140 Spicy Meat and Cheese Snack - 1.125 oz	\$0.65
1	2	3	4	5	10	15	20	7145 Pizza Combos	\$1.19
1	2	3	4	5	10	15	20	7146 Corn Nuts	\$0.89
1	2	3	4	5	10	15	20	7147 Hot Pickle	\$1.00
1	2	3	4	5	10	15	20	7148 Red Hot Sausage	\$0.59
1	2	3	4	5	10	15	20	7149 Sweet and Hot Snack Mix	\$0.91

**CANDY**

1	2	3	4	5	10	15	20	8001 Butterscotch Buttons - Bag - 4.5 oz	\$0.97
1	2	3	4	5	10	15	20	8002 Jolly Rancher - Assorted Bag - 4 oz	\$0.97
1	2	3	4	5	10	15	20	8004 Starlight Mints - Bag - 4.5 oz	\$0.97
1	2	3	4	5	10	15	20	8005 Atomic Fire Balls - Bag - 4 oz	\$0.97
1	2	3	4	5	10	15	20	8006 Sugar Free Wild Fruit - Bag - 2 oz	\$0.97
1	2	3	4	5	10	15	20	8007 M&M Peanuts - 1.74 oz	\$0.80
1	2	3	4	5	10	15	20	8008 Baby Ruth - 2.1 oz	\$0.80
1	2	3	4	5	10	15	20	8009 Snickers - 2.07 oz	\$0.80
1	2	3	4	5	10	15	20	8012 Reese Peanut Butter Cup - 1.5 oz	\$0.80
1	2	3	4	5	10	15	20	8013 Skittles - 2.17 oz	\$0.80
1	2	3	4	5	10	15	20	8020 Cherry Sours	\$1.99
1	2	3	4	5	10	15	20	8021 Orange Slices	\$1.99

**COOKIES**

1	2	3	4	5	10	15	20	9005 Strawberry Crème - 8 oz	\$1.58
1	2	3	4	5	10	15	20	9006 Chocolate Chip - 7.5 oz	\$1.58
1	2	3	4	5	10	15	20	9007 Butterfinger - 7.5 oz	\$1.58
1	2	3	4	5	10	15	20	9011 Peanut Butter - 2.75 oz	\$0.60
1	2	3	4	5	10	15	20	9015 Chocolate Pecan	\$1.58
1	2	3	4	5	10	15	20	9016 Chocolate and Creme	\$1.58

**STAMPS**

1	2	3	4	5	10	15	20	9201 Book of Stamps - 10	\$4.10
1	2	3	4	5	10	15	20	9203 Stamped Envelope w/paper	\$0.60

**CLOTHING**

1	2	3	4	5	10	15	20	9100 Men's Briefs - Small	\$2.75
1	2	3	4	5	10	15	20	9101 Men's Briefs - Medium	\$2.75
1	2	3	4	5	10	15	20	9102 Men's Briefs - Large	\$2.75
1	2	3	4	5	10	15	20	9103 Men's Briefs - XL	\$2.75
1	2	3	4	5	10	15	20	9104 Men's Briefs - 2XL	\$3.75

**CLOTHING PRICE**

1	2	3	4	5	10	15	20	9105 Men's Briefs - 3XL	\$3.75
1	2	3	4	5	10	15	20	9106 Men's Briefs - 4XL	\$4.65
1	2	3	4	5	10	15	20	9107 Men's Briefs - 5XL	\$4.65
1	2	3	4	5	10	15	20	9108 Women's Panties - Small	\$2.75
1	2	3	4	5	10	15	20	9109 Women's Panties - Medium	\$2.75
1	2	3	4	5	10	15	20	9110 Women's Panties - Large	\$2.75
1	2	3	4	5	10	15	20	9111 Women's Panties - XL	\$2.75
1	2	3	4	5	10	15	20	9112 Women's Panties - 2XL	\$2.75
1	2	3	4	5	10	15	20	9113 Women's Panties - 3XL	\$2.75
1	2	3	4	5	10	15	20	9114 Women's Panties - 4 XL	\$3.75
1	2	3	4	5	10	15	20	9115 Sports Bra (34 A, 34B, 34C)	\$10.00
1	2	3	4	5	10	15	20	9116 Sports Bra (36B, 36C)	\$10.00
1	2	3	4	5	10	15	20	9117 Sports Bra (38B, 38C)	\$10.00
1	2	3	4	5	10	15	20	9119 Sports Bra (40C, 42C)	\$12.50
1	2	3	4	5	10	15	20	9121 Sports Bra (44 D)	\$12.50
1	2	3	4	5	10	15	20	9122 Socks - One Size	\$1.25

**Unisex Canvas Shoes (Women's 2 sizes down)**

1	2	3	4	5	10	15	20	9281 Unisex Canvas Shoes (Sz 4)	\$16.00
1	2	3	4	5	10	15	20	9282 Unisex Canvas Shoes (Sz 5)	\$16.00
1	2	3	4	5	10	15	20	9283 Unisex Canvas Shoes (Sz 6)	\$16.00
1	2	3	4	5	10	15	20	9284 Unisex Canvas Shoes (Sz 7)	\$16.00
1	2	3	4	5	10	15	20	9285 Unisex Canvas Shoes (Sz 8)	\$16.00
1	2	3	4	5	10	15	20	9286 Unisex Canvas Shoes (Sz 9)	\$16.00
1	2	3	4	5	10	15	20	9287 Unisex Canvas Shoes (Sz 10)	\$16.00
1	2	3	4	5	10	15	20	9288 Unisex Canvas Shoes (Sz 11)	\$16.00
1	2	3	4	5	10	15	20	9289 Unisex Canvas Shoes (Sz 12)	\$16.00
1	2	3	4	5	10	15	20	9290 Unisex Canvas Shoes (Sz 13)	\$16.00
1	2	3	4	5	10	15	20	9191 Unisex Canvas Shoes (Sz 14)	\$16.00
1	2	3	4	5	10	15	20	9123 Shower Shoes - Cross Small	\$1.00
1	2	3	4	5	10	15	20	9124 Shower Shoes - Cross Medium	\$1.00
1	2	3	4	5	10	15	20	9125 Shower Shoes - Cross Large	\$1.00
1	2	3	4	5	10	15	20	9126 Shower Shoes - Deluxe Medium	\$3.25
1	2	3	4	5	10	15	20	9127 Shower Shoes - Deluxe Large	\$3.25
1	2	3	4	5	10	15	20	9128 Shower Shoes - Deluxe XL	\$3.25
1	2	3	4	5	10	15	20	9129 Wash Cloth	\$1.65
1	2	3	4	5	10	15	20	9130 Bath Towel	\$6.00
1	2	3	4	5	10	15	20	9131 Boxers - Small	\$3.50
1	2	3	4	5	10	15	20	9132 Boxers - Medium	\$3.50
1	2	3	4	5	10	15	20	9133 Boxers - Large	\$3.50
1	2	3	4	5	10	15	20	9134 Boxers - XL	\$3.50
1	2	3	4	5	10	15	20	9135 Boxers - 2XL	\$4.85
1	2	3	4	5	10	15	20	9136 Boxers - 3XL	\$6.25
1	2	3	4	5	10	15	20	9137 Boxers - 4XL	\$6.25
1	2	3	4	5	10	15	20	9138 Boxers - 5 XL	\$6.25
1	2	3	4	5	10	15	20	9139 Boxers - 6XL	\$6.25
1	2	3	4	5	10	15	20	9140 Thermal Pants - Small	\$5.95
1	2	3	4	5	10	15	20	9141 Thermal Pants - Medium	\$5.95
1	2	3	4	5	10	15	20	9142 Thermal Pants - Large	\$5.95
1	2	3	4	5	10	15	20	9143 Thermal Pants - XL	\$5.95
1	2	3	4	5	10	15	20	9144 Thermal Pants - 2XL	\$5.95
1	2	3	4	5	10	15	20	9145 Thermal Pants - 3XL	\$5.95
1	2	3	4	5	10	15	20	9146 Thermal Pante - 4 XL	\$5.95
1	2	3	4	5	10	15	20	9147 Thermal Top - Small	\$5.95
1	2	3	4	5	10	15	20	9148 Thermal Top - Medium	\$5.95
1	2	3	4	5	10	15	20	9149 Thermal Top - Large	\$5.95
1	2	3	4	5	10	15	20	9150 Thermal Top - XL	\$5.95
1	2	3	4	5	10	15	20	9151 Thermal Top - 2XL	\$5.95
1	2	3	4	5	10	15	20	9152 Thermal Top - 3XL	\$6.80
1	2	3	4	5	10	15	20	9153 Thermal Top - 4 XL	\$6.80
1	2	3	4	5	10	15	20	9154 T-Shirt - Small	\$3.00
1	2	3	4	5	10	15	20	9155 T-Shirt - Medium	\$3.00
1	2	3	4	5	10	15	20	9156 T-Shirt - Large	\$3.00
1	2	3	4	5	10	15	20	9157 T-Shirt - XL	\$3.08
1	2	3	4	5	10	15	20	9158 T-Shirt - 2XL	\$3.48
1	2	3	4	5	10	15	20	9159 T-Shirt - 3XL	\$3.73
1	2	3	4	5	10	15	20	9160 T-Shirt - 4XL	\$3.98
1	2	3	4	5	10	15	20	9161 T-Shirt - 6XL	\$4.63

**SPECIALS**

1	2	3	4	5	10	15	20	4025 Special 1	
1	2	3	4	5	10	15	20	4026 Special 2	
1	2	3	4	5	10	15	20	4027 Special 3	
1	2	3	4	5	10	15	20	4028 Special 4	
1	2	3	4	5	10	15	20	4029 Special 5	
1	2	3	4	5	10	15	20	4030 Special 6	
1	2	3	4	5	10	15	20	4031 Special 7	
1	2	3	4	5	10	15	20	4032 Special 8	
1	2	3	4	5	10	15	20	4033 Special 9	
1	2	3	4	5	10	15	20	4034 Special 10	





2D

*MEMORANDUM*

To: Superintendent Staff

From: Holly Demske

Subject: Thanksgiving Schedule

Date: November 14, 2006

For the upcoming Thanksgiving holiday, the delivery process will be changing.

**SCAN FORMS WILL BE DISPERSED ON SATURDAY,  
NOVEMBER 18, 2006.**

**SCAN FORMS WILL BE PICKED UP ON TUESDAY  
MORNING, NOVEMBER 21, 2006 AT 8AM.**

**The delivery schedule for the holiday week is as follows:**

Tuesday, November 21 - 3:30pm:	Division 11
Wednesday, November 22 - 3:30pm:	Divisions 5, 10 and 9
Thursday, November 23:	NO DELIVERY
Friday, November 24 - 9:30am:	Divisions 3, 4, 8, 14, 17
Friday, November 24 - 3:00pm:	Division 1, 2, 6
Saturday, November 25 - 8am:	Reroutes

**Please post the following approved memo to the detainee population.**

If you have any questions or concerns, please contact the commissary office at 869-5217 or 847-0297.

Thank you,

A handwritten signature in cursive script, appearing to read "Holly Demske", enclosed within a hand-drawn, irregular oval border.

Holly Demske  
Cook County Commissary



COOK COUNTY DEPARTMENT OF CORRECTIONS

## RESTRICTED DIET ORDER FORM

Date Diet Begins: \_\_\_\_\_

Cancellation Date: 9/26/05Detainee's Name: Clark, RobertID# 244-296333Housing Unit: X-2DDOB: 11/20/62

DIET ORDER (CHECK ONLY ONE DIET AT A TIME PLEASE)

ALL DIETS ARE PORK FREE

Diet Code: \_\_\_\_\_

Type of Diet: \_\_\_\_\_

☒ Q

CHOLESTEROL/FAT RESTRICTED/LOW SALT BLAND (30% FAT, 4 GM NA,)

☐ S

DENTAL/MECHANICAL (FOR DENTAL PROBLEMS)

☐ H

NUTRITION SUPPORT DIET WITH H.S. SNACK (+ 400 CALORIES)

☐ 7

NO CONCENTRATED SWEETS WITH H.S. SNACK (TYPE II DIABETES/Wt Control)

☐ K

2400 ADA WITH H.S. SNACK

☐ M

2800 ADA WITH H.S. SNACK

☐ N

3200 ADA WITH H.S. SNACK

☐ P

PREGNANCY WITH H.S. SNACK

☐ 1

Long Term/High Protein Full Liquid (Broken jaw diet; 6 weeks only)

☐ 2

Pureed Diet (No teeth or Dysphagic)

☐ F

Full Liquid (3 Days Only)

☐ C

Clear Diet (2 Days Only)

☐ R

Renal Diet (Impaired Renal Function Approx. 95 gms Protein)

☐ L

No Milk Diet (Intolerance for milk as a beverage)

☐ 3

Low Fiber/Low Residue (Acute Gastroenteritis/post GI surgery)

☐ 4

Acute Hepatitis/Cirrhosis (Non Acute Encephalopathy)

Physician's Signature

Date entered in CMIS

Entered By:

To contact the food service department or Aramark Site Dietitian, please call 523-1345 Fax 523-2565

White Copy- Patient Chart Yellow copy: Retain 30 days.



**Detainee Request Response**

ID#: 2004-009-633  
Living Area: Division 10 2D  
Date: 2-26-06

Concern: My diet was discontinued on September 9, 2006. I continue to receive this diet. I would like to be taken off the diet.

Response: Your name still is listed on the current special diet order roster. You may want to follow up with your medical provider to request that this order be discontinued and properly entered into the facility computer system.

Thank you for making us aware of your concerns